

To Paul how are you I am so lazy
I can scarcely copy your notes.

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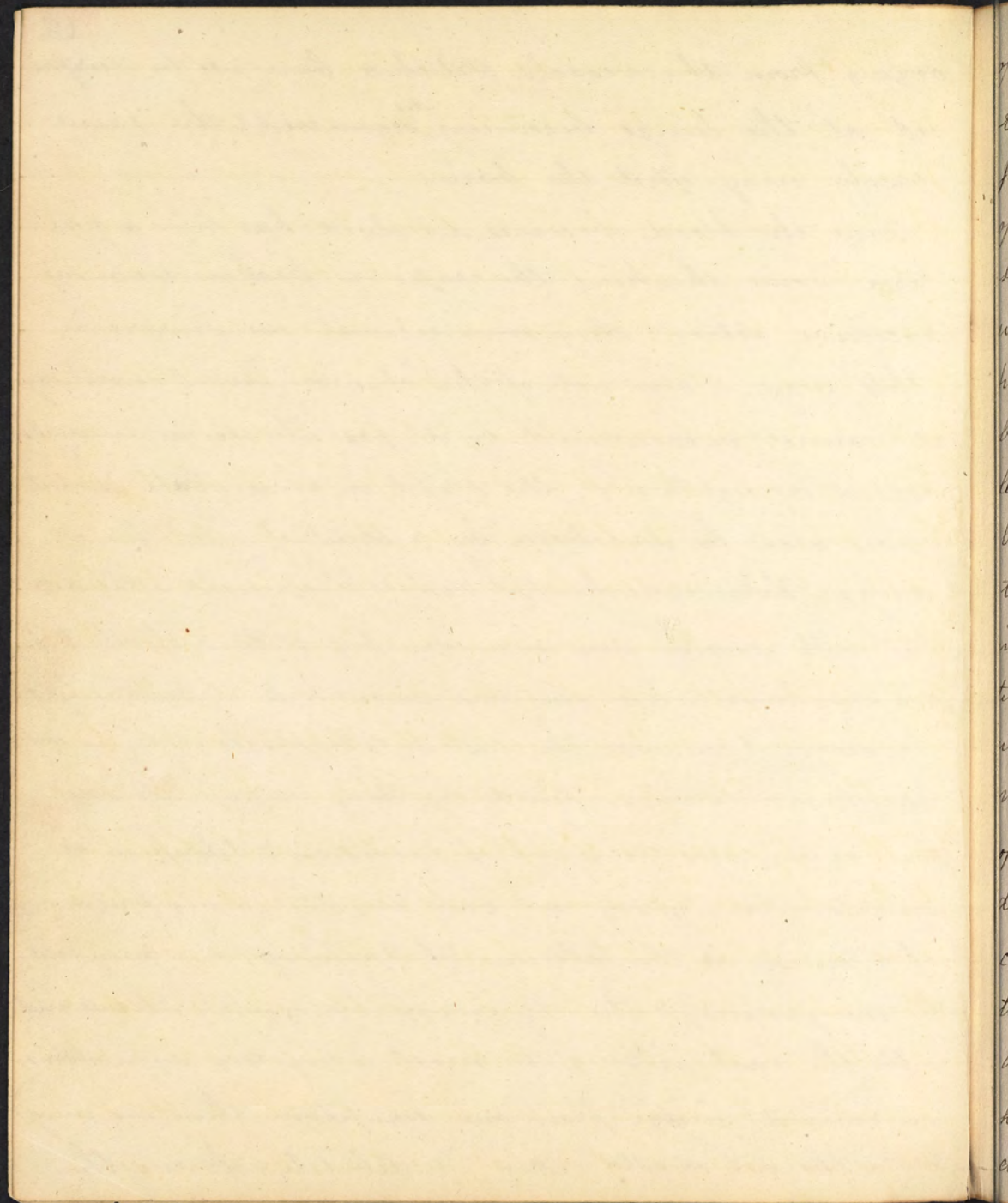
We have observed considerable variety in the human minds, some giving up on the smallest misfortunes, others combatting & bearing up bravely to the last: thus it appears to me in the systems of different men: while some possess great tenacity of life others, a trifling attack will reduce to the lowest stage. — Reflecting Practitioners must be aware of the tendency of the different seasons to affect different parts: thus in summer we have Cholera, Dysentery, Diarrhoea showing an evident tendency in this season to affect the bowels; & here is the principal particular seat of the Y. Fever. when it makes its appearance; in the cold seasons we have Pleurisy & Colds, affecting particularly the thorax, this may explain Typhus having a Pneumonic form, hence many of the appearances we have of inflammation from the dissolved blood entering the part: I have seen a child in Cholera worn down with disease having the red inflamed eye, the same I have seen in Typhus & a dangerous appearance it is; it is not occasioned by excessive action; when we see the dissolved blood



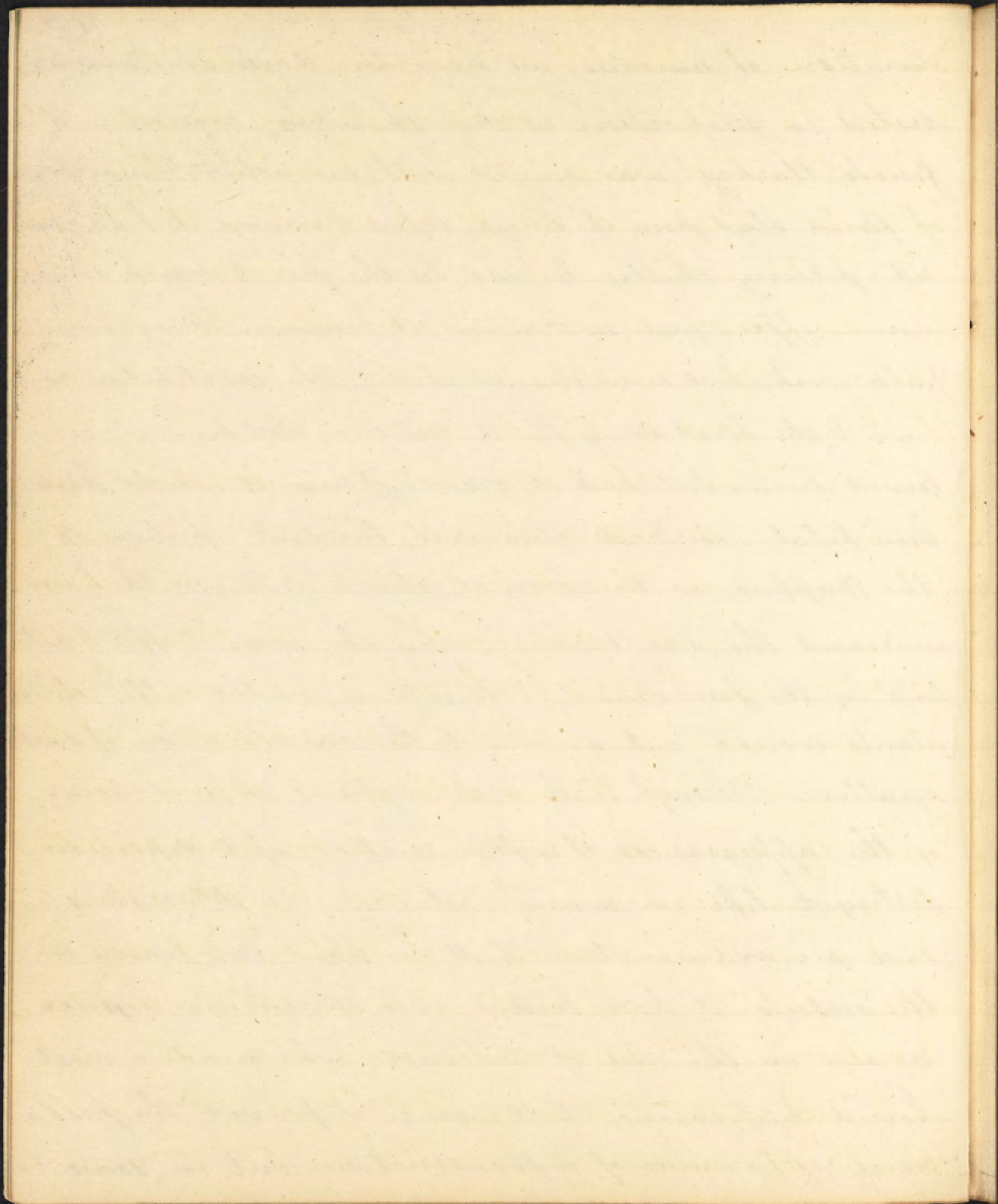
oozing from the vessels Petechiae can we be surprised at the lungs becoming ^{dis}organised? the same easily may effect the brain.

How the blood becomes dissolved has been a question; some thinking the crasis is broken down by excessive action: they even recount for scurvy in this way. I am not of this opinion but I do not say it cannot be occasioned by it, for we see in animals killed by lightning, the blood in this state; but it may also be dissolved by a want of vital power.

Eliza Hildeburn when Dr Wistar & myself attended her with scurvy was in a very low state, & spotted all over; nevertheless she was raised & lived several yrs. In scurvy I consider the system to be prostrated, as on shipboard being confined by long voyages to one diet or in sieges to want of provision & depression of spirits - In Typhus we have not the strong pulse of Pleurisy or the laborious of Apoplexy, but frequently the gaseous & the dangerous Synocula; I have met with the last among the most dangerous symptoms: we cannot judge from one symptom; thus we may have the hot or cold skin in debility; observe the

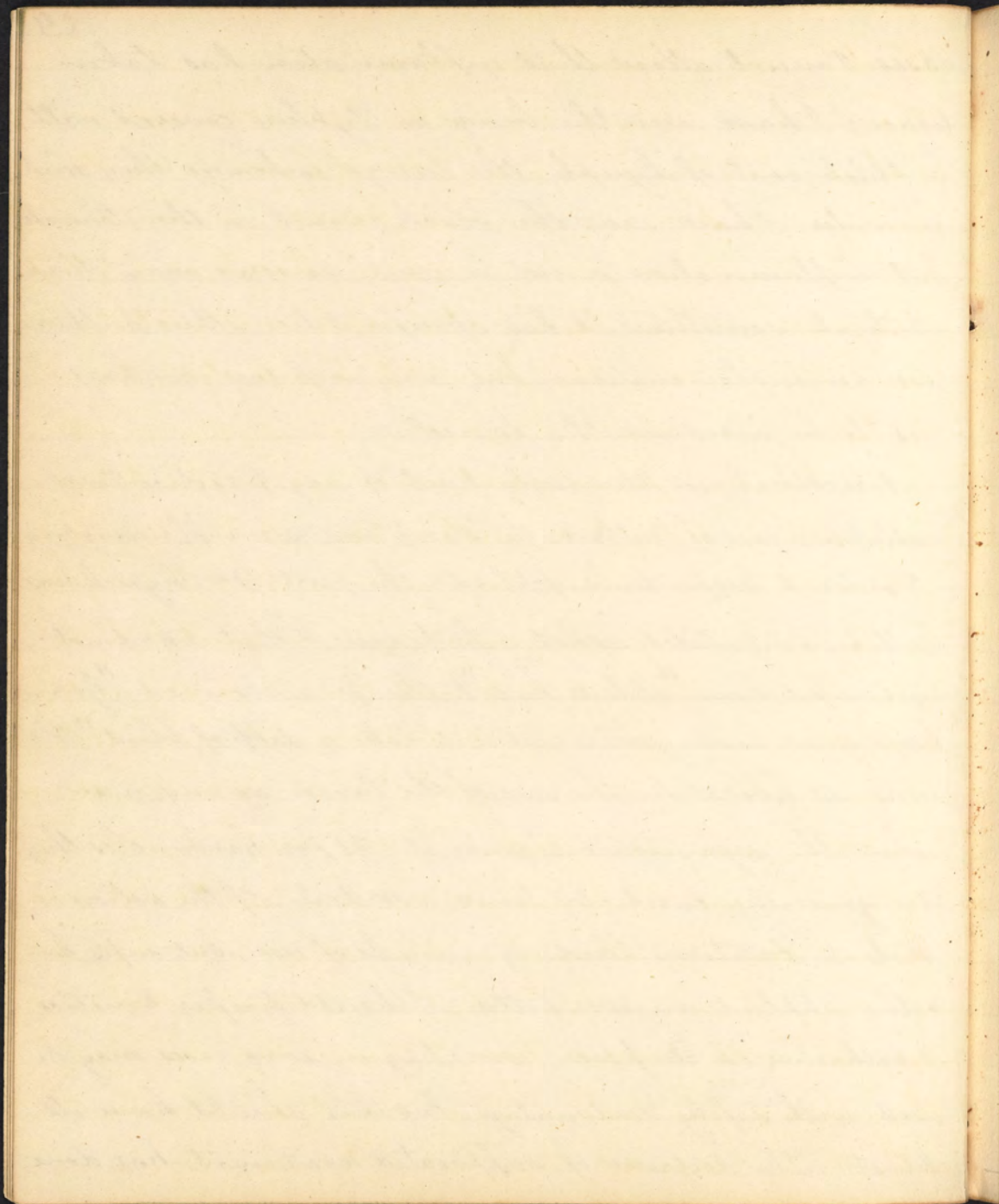


operation of remedies, we have the dark sputum arrested in proportion as the skin is excited. Josiah Starkey was seized with an active Hemorrhage of florid blood from the lungs, before I arrived it had ceased; feeling chilly he sat by the fire & drank some warm coffee, just as I entered it commenced again, pulse weak, but countenance strong, the constitution robust & the blood being florid I at once bled him: it relieved him, but had it been Typhus, it would have been fatal: contrast this with the dark sputum of the Typhus, in the former stimulants would have increased the hemorrhage; even the warm coffee & sitting by the fire caused it to return, in the latter stimulants would put an end to the expectoration of dark matter. — Though P.M. examinations showed some of the appearances of inflammation, yet depletion destroyed life in many instances. — In Dr. Wistar's case on examination P.M. no blood was found in the vessels it had leaked into the cellular texture as also in the case of Billmore, who made a most horrid appearance P.M.: hence it proved the fallacious appearance of inflammation, but in some



cases I must allow that inflammation has taken place; I have seen the lungs in Typhus covered with a thick coat of Lymph, the lungs so heavy they sink in water. I have seen the black vomit in the stomach but inflammation is not a unit as some may think. I think sometimes it has specific action, thus Anthracis are inflammations. but who will say Anthrax is to be cured by the lancet.

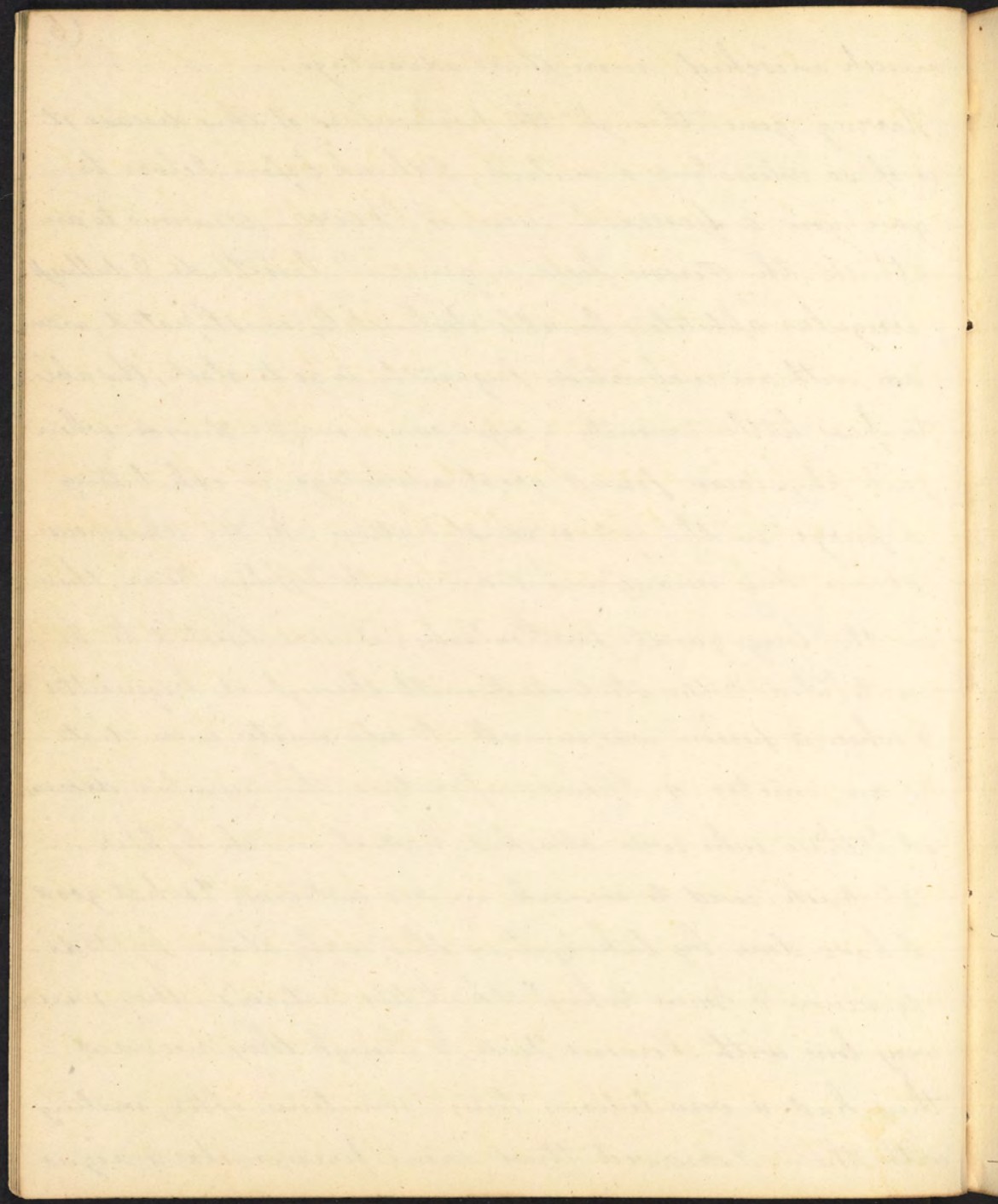
I recollect in the early part of my practice I was called to a case of Anthrax, the symptoms were inflammatory. I ordered leeches to be applied to the part, Dr Physick was called in; I stated what I had done & that I had not yet bled him. "Bled him"? the D^r exclaimed, "God bless your soul you must not take a drop of blood." He was as liberal in the use of the lancet as any man when the symptoms require it. As for Carbuncles they are generally cured by tonics & cordials. If the action is violent cautious bleeding may be of use, but cups locally applied answer better. I should prefer Emetics & Cathartics in its place, sweating in some cases may be used with safety & advantage, but this should have its limits. The doctrine of suffocated excitement has done



much mischief; more than advantage.

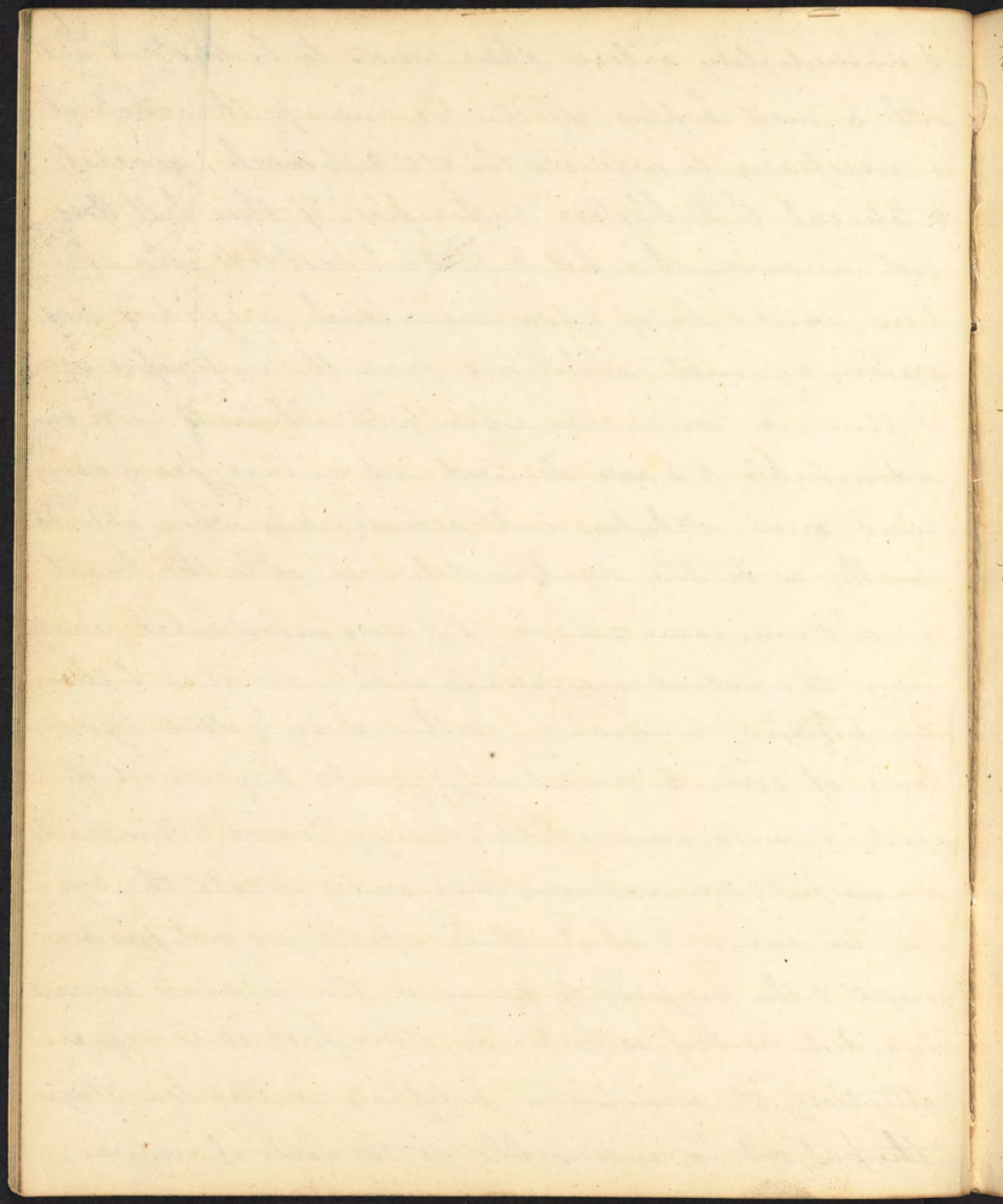
Having gone through the particulars of this disease it is of so interesting a nature, I think before I close to give you a General view of Fever. Previous to an attack the Person feels a general lassitude & dullness, irregular appetite, bowels obstinately constipated, nausea with an inclination frequently to go to stool, tho' able to pass little frequently a rigor comes on: Dr. Hewson when jail physician found great advantage in exhibiting a purge in the prior constipation: At the Alms-house at one time many were taken with Typhus Fever, those in the long garret particularly; it was directed to be ventilated & the students to walk through it frequently & when a person was unwell to administer immediately an emetic of Ipecac. after this the number decreased & those who were attacked had it much lighter.

Dr. Rush used to remark in his lectures, "what good I have done by taking it in this early stage by Pediturium & Wine & Whisky." I had two patients, they were very low with Nervous Fever, & though they recovered they had a very tedious time, sometime after, meeting with them, I observed these same premonitory signs



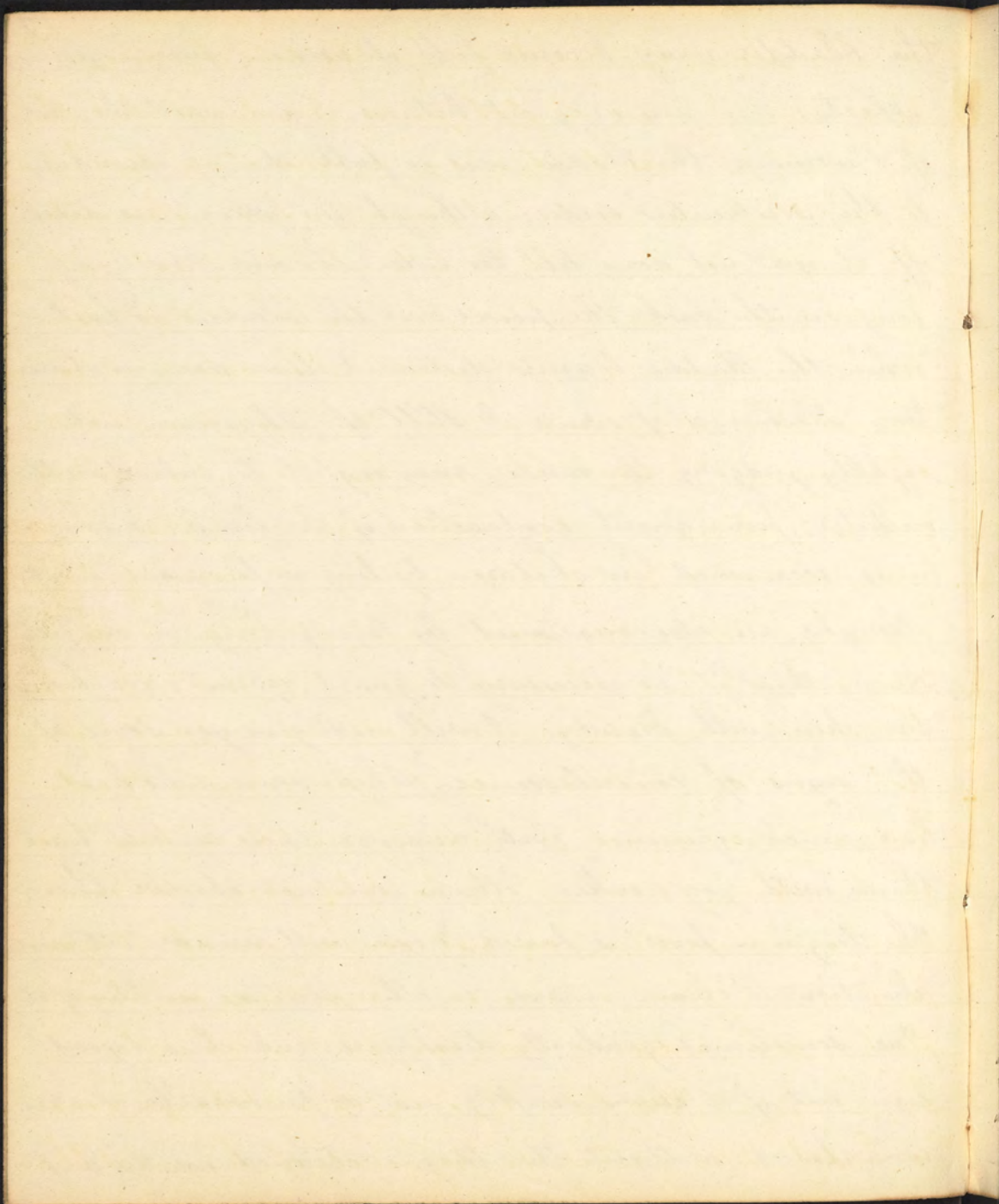
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I immediately ordered their wrists to be blistered and with a most happy effect. — To sum up the whole it is necessary to evacuate the S.V. & stomach, general & topical V.S. blisters sudorifics; if this last does not answer, skin hot & patient restless, cold ablu-tions would be of advantage. Much prejudice has arisen against ablu-tions from the improper use of them: in some cases when cold ablu-tions were inadmissible I have derived advantage from using tepid ones: Blisters will relieve pain when applied locally as to the head in delirium, or to the breast in a Pneumonic attack. If I were asked what remedy (when the patient was restless with inclination to change his position continually, with sighing & other symptoms of Nervous irritability) would have most effect I would answer, Blistering. Tonics & Stimulants are useful, remembering they may elevate the system too much & that their effects are not permanent & the necessity of giving in the intervals nourishing diet as beef-soup &c: an other fact will require attention. it sometimes happens in the low stage — the patient is insensible to the calls of nature,



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the bladder may become full of urine & cause injurious effects; In my surgical lectures, I mentioned the case of a woman; the bladder was so full that it ascended to the scrobiculus cordis; although the urine was drawn off, it was not done till too late. She died: By lying long on the back the power over the bladder is lost. when the bladder becomes distended there are involuntary discharges of urine, & still the Physician not rightly judging the cause, may neglect to introduce the catheter; permanent contraction of the limbs is sometimes occasioned in children by long confinement in bed.

Sloughs are also occasioned by laying long in one position, these it is necessary to guard against; washing the skin with brandy. I will next give you some of the signs of convalescence, Physicians who have had much experience will discover these & will hail them with joy, when others will not observe them. The tongue in fever is furred, & one will discover its inclination to clean, when the other will see nothing of it. Fur sometimes gradually disappears, which is a good sign, but if it cleans swiftly, not so favourable. Norris convalesced without the tongue cleaned waited & it



finally cleaned. Sweating near the time of crisis is
 favourable & more so if the pulse is reduced, but this
 last will fail as it appears in ty. Fever. near dissolution.
 When the pulse continues frequent I keep a close watch.
 In a state of fever, the bowels are ^{always} unnatural, costive
 or otherwise; when after the discharges have been
 dark, they assume a natural yellow colour it is
 favourable; it signifies that the liver has thrown
 off disease & is secreting healthy bile; & yet there
 are exceptions to this as the case of Pepper. The
 urine is not attended to as much as it deserves, the
 older practitioners paid great attention to it, even
 neglecting others of importance. Dr. Wistar & Griffiths
 attached much importance to it; for myself I have
 not paid due attention to it. The German Practi-
 tioners place much confidence in the appearance
 of the urine. Much may be told from the coun-
 tenance: description cannot convey much, it must
 be acquired from experience. Many times on their
 first attack patients will lose their inclination
 for favourite practices or food, thus although a man
 in health had rather be deprived of his meal than

1. Heberden says 160 strokes in the minute in ~~the~~
adults is always the precursor of death. I have
found this nearly true.

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tobacco, he will lose all desire for it when taken: but on the approach of convalescence, his hankering will return this we may hail as a favourable omen, as also their desire for wholesome food especially bread; a remark made by a black nurse at the Y. Fever Hospital 1805. I have found much truth, that "all those patients who wanted bread, recovered." One patient I remarked particularly when very low, wanted milk & would not rest satisfied till he got it; from that time he began to recover; this patient did not fairly recover his intellect until 3 months afterwards: When there has been much delirium & this subsides it is favourable: tho' this can not be depended on as it will occur a short time before dissolution. - The unfavourable symptoms are the pulse becoming so frequent as it is impossible to count it. particularly if accompanied by subsultus tendinum, (but in this last you may be deceived, mistaking the voluntary actions of the muscles.) I was attending a young lady, very low in nervous Fever. while feeling her pulse, I discovered a twitching in the muscles & finding on enquiry they were not voluntary, I was persuaded she was near her last, & so it proved

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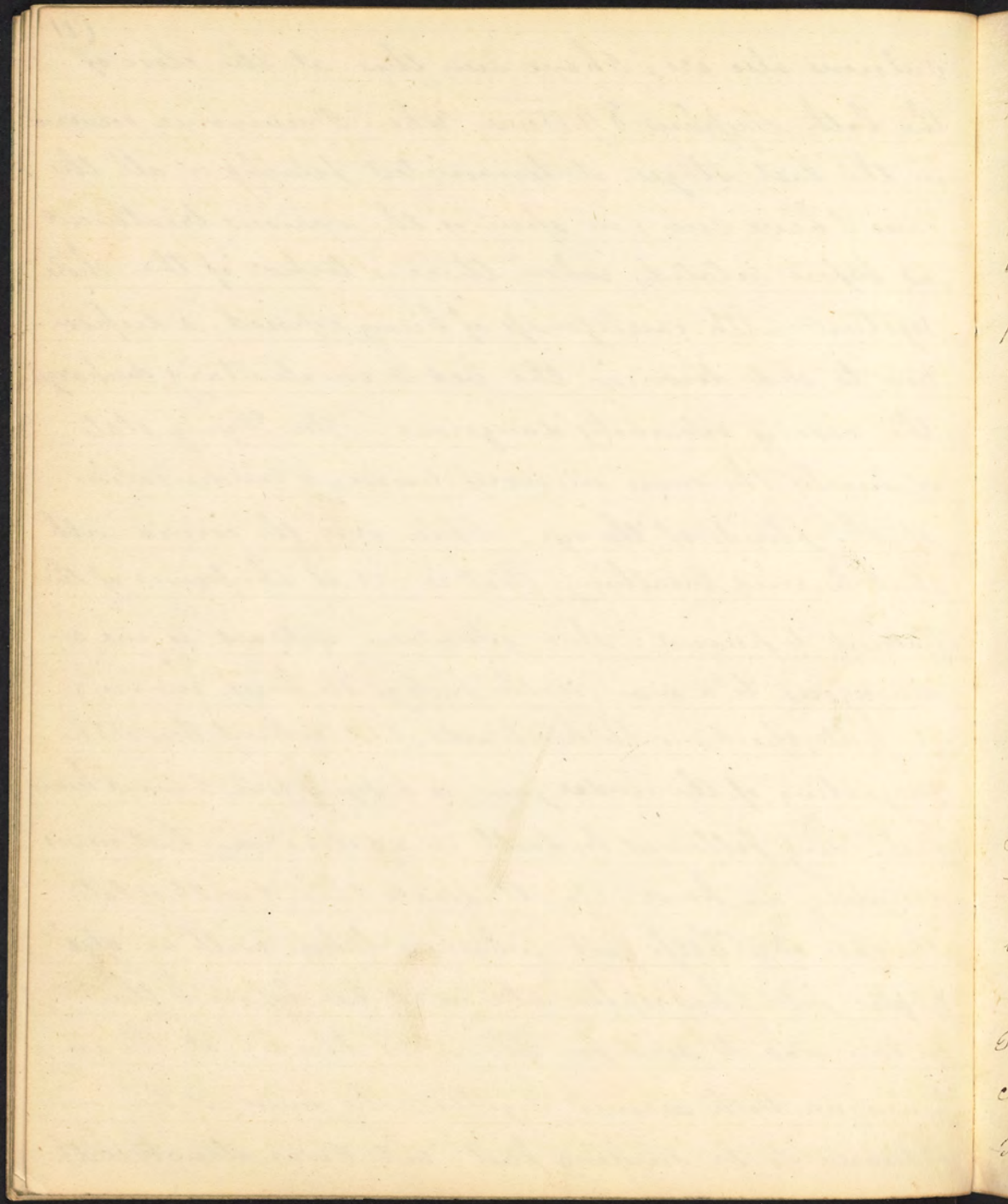
The brown, dry, & chopped tongue is very unfavourable. There is in old people a peculiar kind of tongue, the brown, mucous, to appearance covered with currant jelly. This is very bad. The other day I went to see an old lady near Darby, with Dr Shallcross. I observed to the Dr, that though the patient's tongue had cleaned, yet it was a very bad one: died.

Conrad Ripberger, A German, an experienced cupper, has formed very correct Prognostics from the blood: after cupping Dr Wistar on going into another room he said to me, "Dr Wistar will die". I asked him why, "He has got the blue blood & they never recover" was his answer; I also in the case of Hurly he prognosticated death from the blue blood & so it came out. Sometime after I got him to cup another patient of mine, an old lady, meeting him in the St, I asked "how is the blood?" "Blue, she cannot live!". He was correct, in fact I never knew him deceived in regard to this. The blue blood I cannot understand. Perhaps it is the dissolved appearance Delirium coming on in the latter state, particularly of the maniacal kind; with the disposition to snarl at their attendants is extremely fatal, as con

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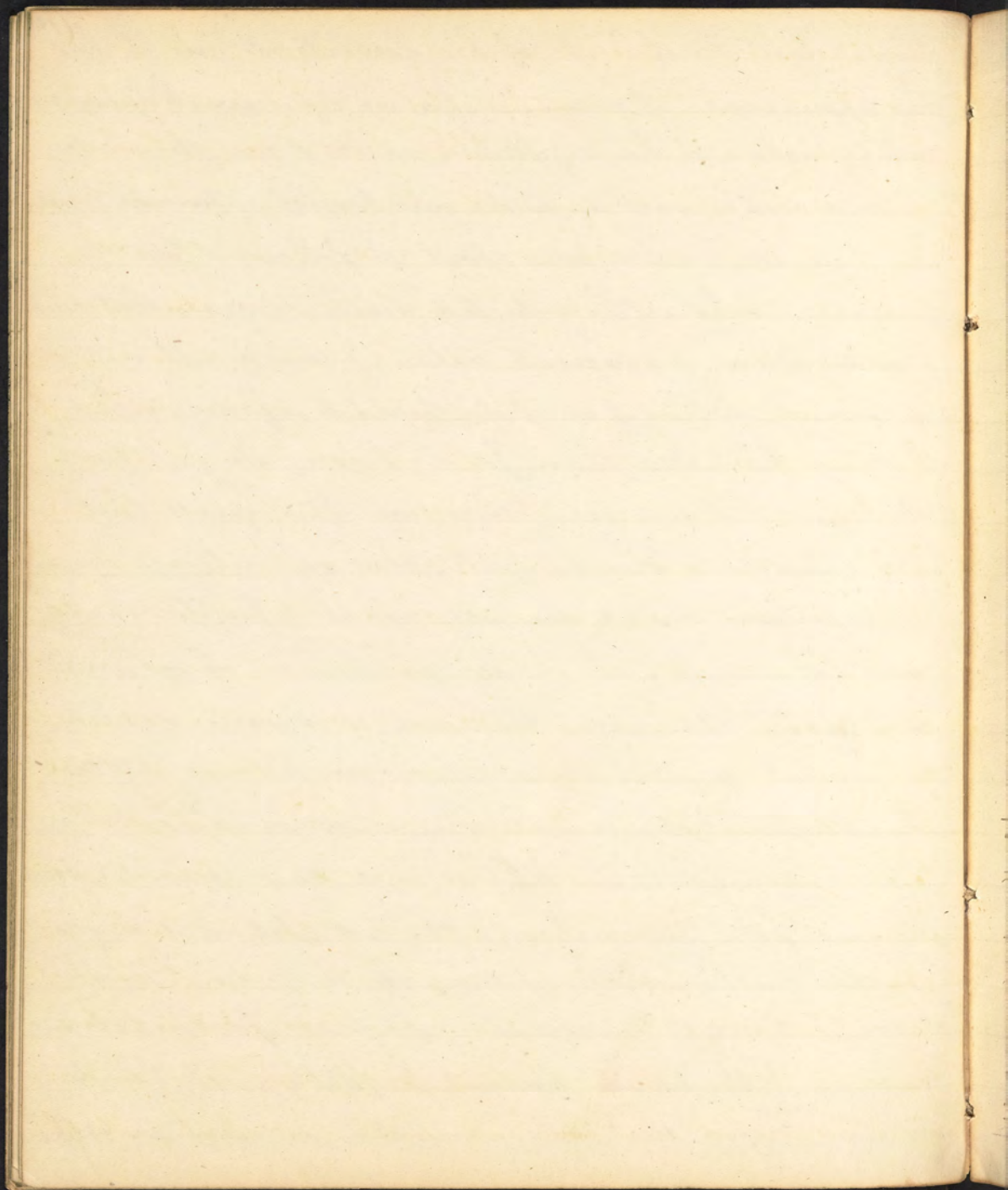
vulsions also are; I have seen this at the close of the both Typhus & Y. Fever. When Pneumonia occurred in the last stages, it terminated fatally in all the cases I have seen, in spite of the various treatment as before related; when there is torpor of the whole system, with carelessness of being exposed, a disposition to slide down in the bed & involuntary discharges the case is extremely dangerous. — The Dying state is nearly the same in every disease, a condensation of the fluids of the eye, a film over the cornea with that hurried breathing that is out of the power of the patient to prevent; this situation appears to me analogous to a man, on the back of a horse running at full speed, with his hands tied behind him. The projecting of the under jaw is a symptom, I never knew fail being followed by death in 20 or 40 min. but never exceeding an hour. To illustrate this, I will relate the case of a little girl who was taken with an apoplectic fit. I had after attended her before & their custom was to send for the Dr. & bleed at the same time; we both arrived together, the pulse at her wrist appeared to be sinking fast; but I was struck with



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the violent throbbings of her carotids; to me it had the appearance of a combination of Apoplexy & Epilepsy while looking at her & reflecting on it, I saw the under jaw suddenly saw the under jaw project outwards, knowing from this what was about to follow, I told the parents, who little expected death so near, that this was an attack of a peculiar nature, & they must not be surprised if the issue of it should be different. I had hardly prepared them for it, before she gave 2 or 3 struggles & it was over. There are other views that are interesting & important, that of Critical Days.

On certain days, diseases will spontaneously come to a crisis, the belief in them is of very ancient date & the most eminent of modern as well as ancient practitioners placed confidence in them. To illustrate it we will view Intermittents: A tertian begins with a chill or rigor, this subsides, skin becomes hot, pulse active & the hot state is developed we then have a solution of this, the heat diminishes, Pulse is reduced, & to end it a profuse perspiration comes on, & the person becomes perfectly well till the 3rd day & after that, the evacuation commences. This



course it will ~~take~~ run give what you will, in (13)
one of these the D^r. may be called in: he may immediately
begin with remedies, as the lancet for instance,
directly the sweat makes its appearance; "Ah, ha!" says
he, "this was the very thing, I have broken the attack"
not thinking it would have ended in this way
had he done nothing. Remedies are not to be given
in in but between the Paroxysms; we do not break
the disease only prevent the return: if all this
be true why are not Remittents subject to the same
laws: in this every day there is a diminution, it
abates in the morning, our efforts to arrest it do
not succeed, this continues for several days, for
3-5-7-9 days, there is a perfect crisis attended with
some sensible evacuations or not any. From this doc-
trine the question may arise, whether it is possible
to cut short an attack; this question is deeply inter-
esting, but I think I am prepared to say, when fe-
vers are fairly formed, as a general rule, it cannot
be cut short, but may be moderated & led to a
favourable conclusion; this is of practical impor-
tance, thus if you ~~can~~ cut short a violent attack.

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violent remedies must be used; now examine this; the time was, when nothing could be too active in ty. Fever. Mercury & V.S. were resorted to latterly & what was the result. consequence? on the contrary experience proves that the very different practice of Dr. Monges, was far preferable, he did not attempt to cut it short, nor did he use mercury, & only in some of the most inflammatory cases he bled a little; This treatment was the most simple & the most successful. This mild practice was pursued in 1805 in the Hospital & was found to be as successful as any other. — But we will descend again to Intermitents, & see the effect of powerful treatment. Instances occurred in Lancaster, There was situated there a practitioner of fine talents, he had written in favour of unity of diseases; there occurred an autumnal epidemic in his neighbourhood; it was very mortal; he lost about 52 patients; his treatment was violent, he would bleed in the last Paroxysm. Tonics he would not use in the last extremity greatest debility, on the contrary other practitioners of but moderate talents met with very great success. They used evacua-

1 Dr. Dorsey & J. Gilliams were treated with very powerful remedies & the former died.

Dr. Rush. - Suffocated excitement -

tions, sweating, the lancet, but little, Blistering & [15]
Bark. The Bark this first one threw entirely away.
This shows what false theory may do, even accom-
panied with the most splendid talents.

There is yet another view necessary to be taken
although it may be very mortifying to the Physician.
It is that many complaints do quite as well when
left alone as when they receive medical aid, Dr Trowbridge
related some facts ^{to me}, that occurred ~~to me~~ under his own
observation; while Physician in the army there were
once about 80 men who were taken sick without the
possibility of receiving medical aid, and he remarked
that they did quite as well as those under his own or
others care. — Physicians in their treatment to pre-
vent certain occurrences should be well assured that
there was occasion for what they were doing. — But do
not understand me that nothing is to be done to mit-
igate the pain, & bring the disease to a favourable issue.

Many specious causes have been assigned for fever
& many Hypotheses have been advanced. Broussais
says that all fevers depend on an inflamed state
of the mucous membranes of the intestines & that

1. On the effects of blood-letting in the library.
2. See Yellowby's essay in the Eclectic Repertory

this is the primary seat; some suppose the liver; (16)
others the brain. I admit all these may be affected
but they are not causes but the effects of Fevers. I
think it may arise without an inflammation. I
attended a lady who had a profuse uterine Hemor-
rhage, cold extremities, feeble pulse; on the next
day she was attacked with Fever, there was consid-
erable excitement, pulse active, so much so V.S.
might have been deemed necessary, had not the
other circumstances been taken into consideration.

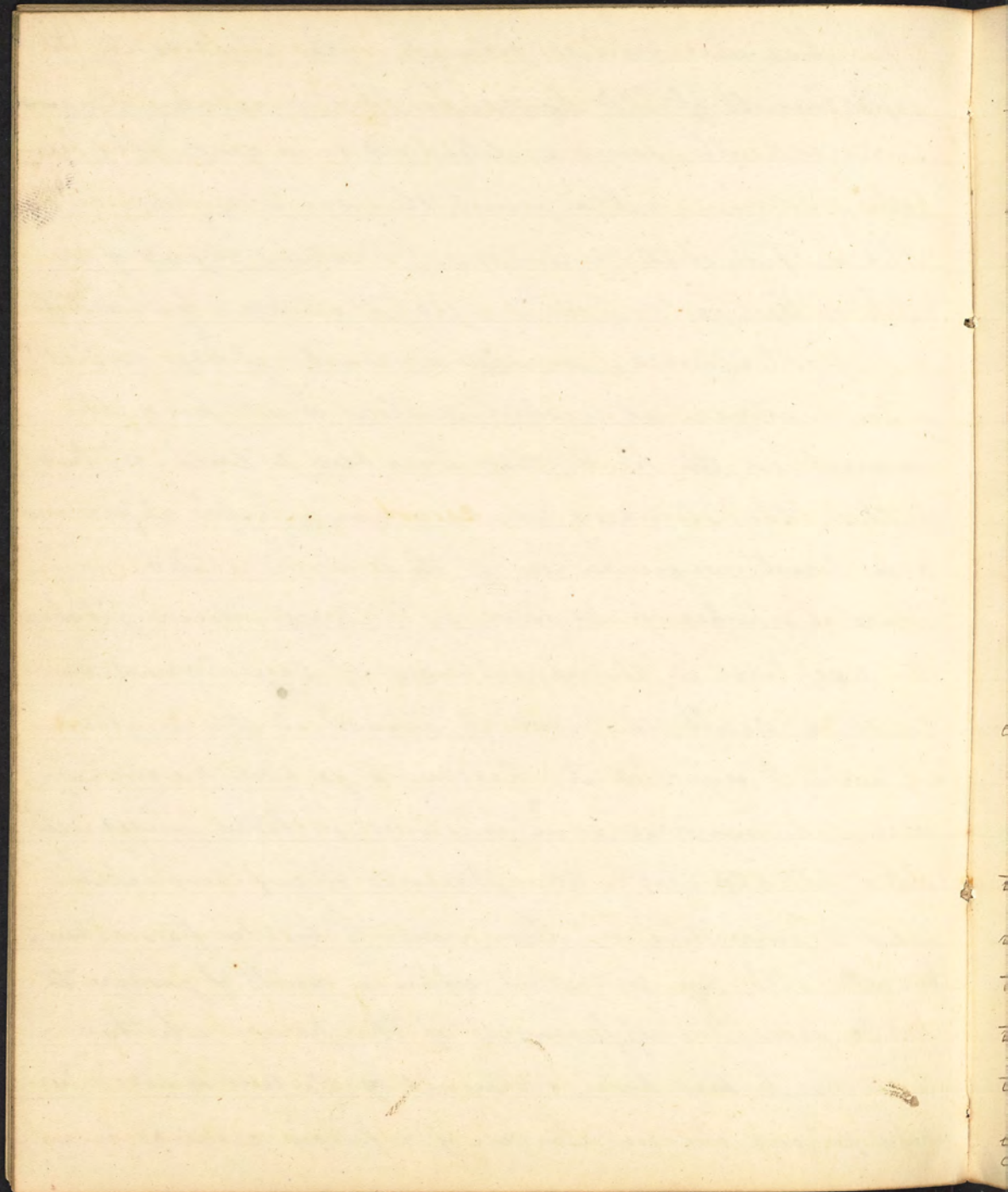
Dr James who attended with me observed that
Denman said that few of those who died of uterine
Hemorrhage died from mere loss of blood; but gen-
erally from the Fever that followed that loss of blood.
In Intermittents we have the cold, hot & sweating
stage, now if there was inflammation in the fever,
we would have it remaining or at any rate bark would
not cure it; but they say dissections give proofs of inflame
the red suffusions of the intestines, their vessels disten-
ded, but even this I think may be without inflammation.
The examination has been made in men just executed
& the same red appearance of the intestines was discovered. 2

1. Dr. Physick once thought fever depended on inflammation, but he now says that it is not the only cause.

This has also been confirmed by the statement (17)
experiments of Dr Seeds. he bled a number of animals
to death, some suddenly & some gradually from
Arteries & veins, yet he found this same appearance on
the surface of the Intestines. To satisfy myself of the
truth of these facts, I went with Dr Embury & Gebhard to
a slaughter house; we saw a number of hogs killed
in the manner we wished, instead of striking the
animal on the head, they were bled to death, in two
of these the stomachs made a remarkable appearance
& in direct confirmation of those above related. -

There is a paper published by Dr Davy intending to show
the deception in the appearances of Inflammation:
that in Death the blood is effused in the neighbour-
ing parts. I requested Dr Harlan to go over his exper-
iments, to immerse some intestines in blood mixed with
water; it had exactly the appearance of inflammation.

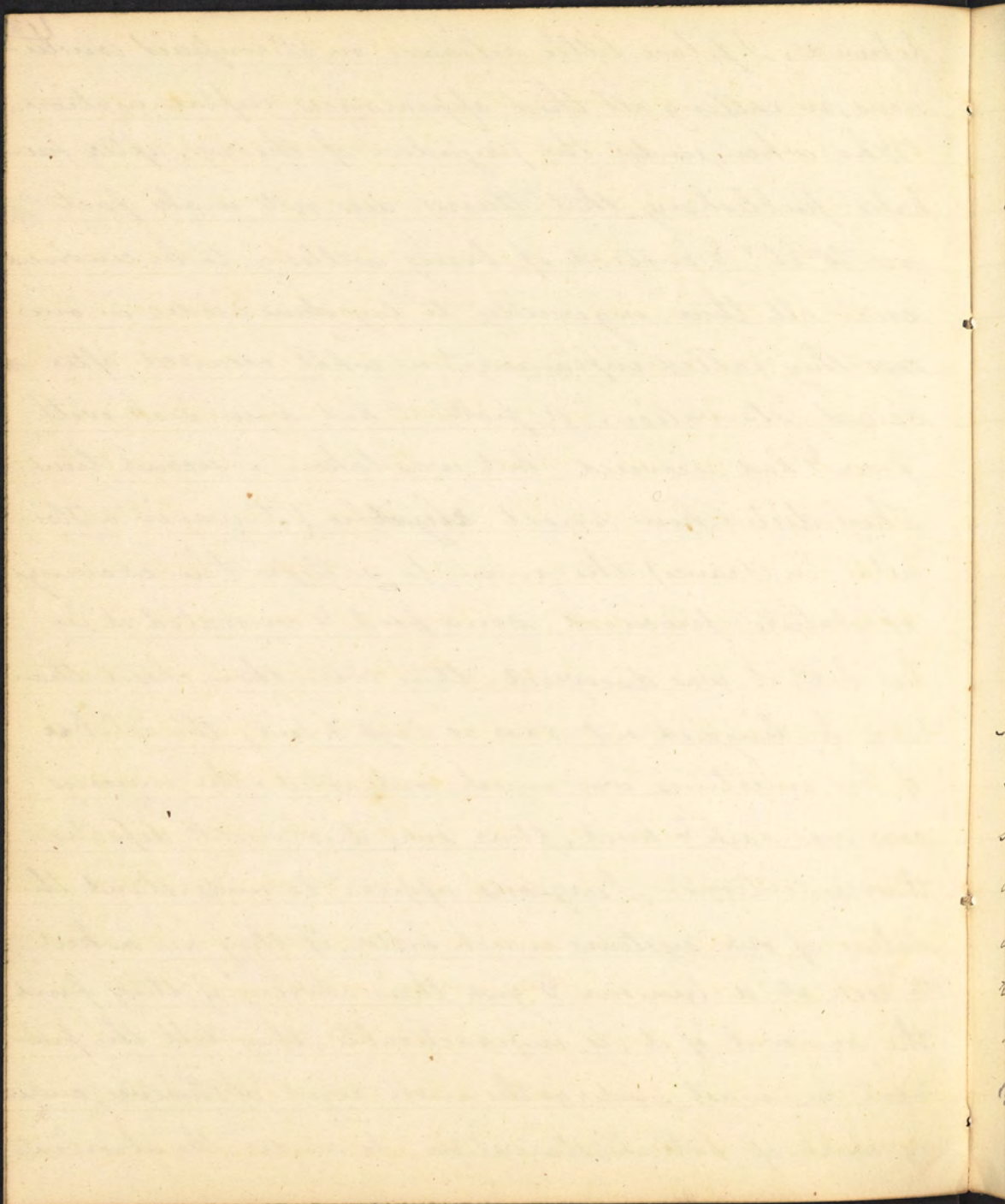
This is interesting on other accounts besides prescribing
for the sick, we are called upon in courts of justice to
decide from the appearances of the person whether
their death has been occasioned by Passion or not; & per-
haps on our opinion the life of a fellow creature may



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depend. I place little reliance on Broussais' conclusions, in calling all those appearances inflammation.

Who when under the prejudice of theory, after perhaps publishing that theory does not make fact bow to it? & instead of being willing to be convinced exert all their ingenuity to lay them aside; in one case they called inflammation what occurred after actual starvation. A patient had been sick with fever & had recovered, but was taken a second time. They dieted him most ~~rigidly~~ (it was in a Hospital in France) the man to satisfy the cravings of nature procured some food & concealed it in his bed, it was discovered, they were then closer than ever; he lingered out 20 or 30 days & died, the calibre of his intestines was much contracted, the mucous coat was dark & livid, their own treatment defeated their intentions. Surgeons appear to understand the nature of our systems much better, if they are asked to look at a tumour & give their advice, if they find the removal of it, is impracticable, they tell the patient he must undergo the most rigid abstinence, merely short of actual starvation, to render the absorbents



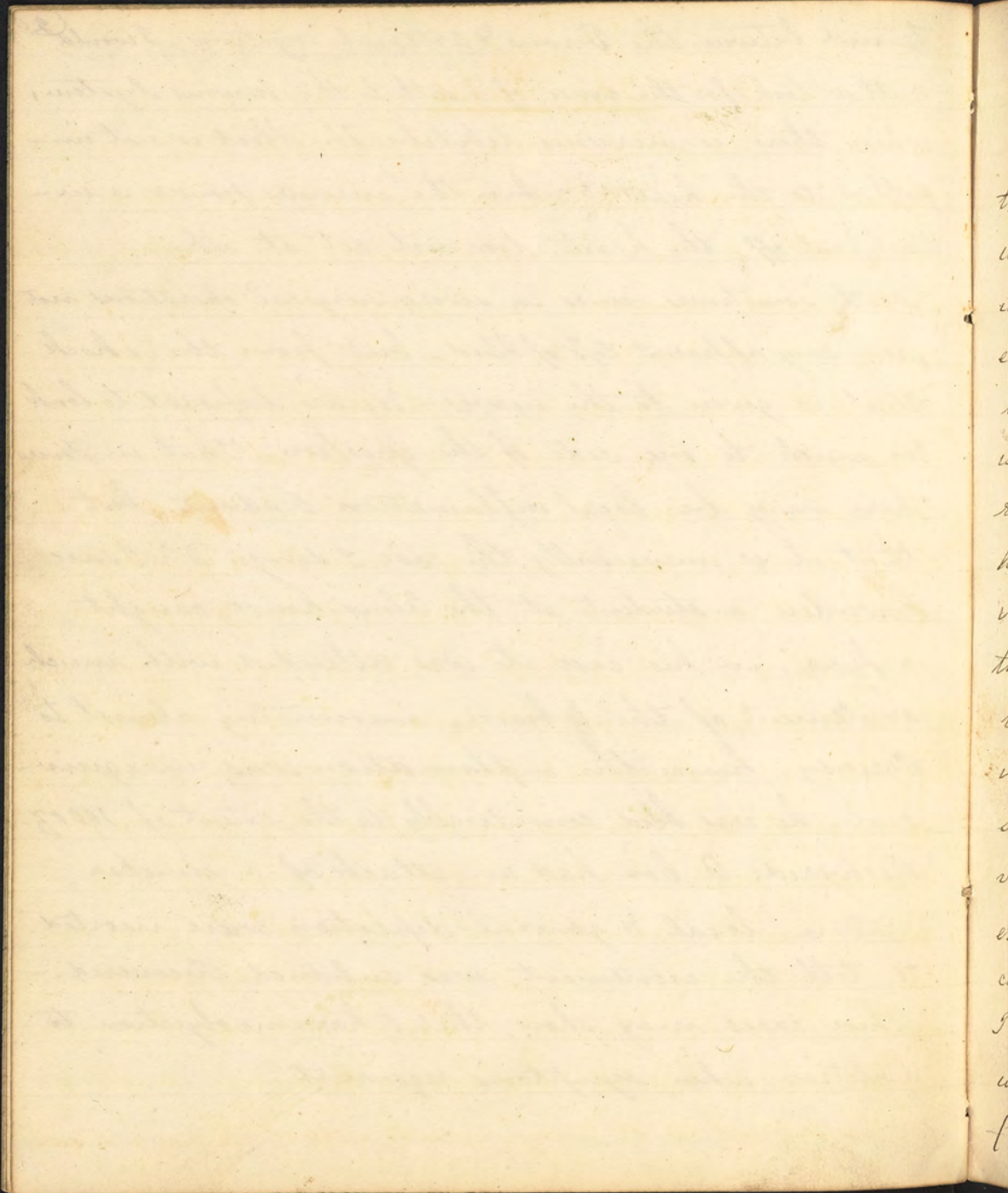
hungry, I cause them to take up the matter (12)
that has been deposited there. Another proof of in-
flammation, they say, is the effusion of serum
I admit that these may occur in fever & end in Dropsy.

but this is far from inflammation, it is owing to the
weakness of the absorbents, being unable to perform their
office. A Boy of Gilbert Gaw fell from a considerable
height, his skull was fractured, the symptoms were
those of compressed brain; with the trephine I took
away some portions of the bone, & certainly if there
had been inflammation, I should have been able to
discover it in this case, although it would not have
been perceptible at the wrist, for through this hole
I could look as through a window, every thing was quiescent, the
system never reacted. on examination P.M. there was a con-
siderable serous effusion; this was not the effect of excessive
action, but rather the last effort of expiring nature it is
a deposit of the arteries after the absorbents are too weak
to perform their office. I have been surprised at the re-
marks of some Medical men on the appearance of ~~all~~
~~gross~~ous congestion after Death. What is Death but a ~~serous~~ous
congestion? Life consists in the due balance being main

See Gregory on Inflammation.

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tained between the Venous & Arterial systems. I would
rather look for the cause of Death to the Nervous System,
when there is nervous debility, the blood is not im-
pelled to the heart, & when the nervous power is en-
tirely cut off, the heart does not act at all.

Death sometimes occurs in severe surgical operations not
from any apparent loss of blood, but from the shock
that is given to the nerves. - We are disposed to look
too much to one side of the question. That in Fevers
there may be local inflammation I admit, but
that it is universally the case I deny. Dr. Isaac
Snowden a student at the Alms-house caught
a fever, in his case it was attended with much
excitement of the ~~the~~ brain, amounting almost to
Phrensy, hence the inflammation was unequiv-
ocal, he was bled considerably to the extent of 100 oz.
Recovered. A boy had an attack of a similar
nature, local & general depletion were resorted
to, till the excitement was subdued. Recovered. -
These cases may show that I have no objection to
depletion when symptoms require it.



The Pulse

May not too much reliance be placed on the pulse? Of this I am about to speak, but before entering into it, I will give you these preliminaries, viz, the Radial artery is the most common one to judge from, because it is easier to get at than the others, but in some cases it is necessary to resort to the Tibial, Temporal, &c. The distribution of the arteries is different in different persons, as the Radial sometimes rolls round the radius: I have been deceived by this; perhaps finding a small branch you may think your patient in a most dangerous state, when by finding the right branch there will be a strong pulse. The pulse will be found very different in different persons. in some it is slow in others very frequent & excessively irritable. It is very similar to the difference in tempers: thus one may be very easily excited, & another with very great difficulty governs his temper when excited, although it is very difficult to excite him. So it is with the pulse, In proof of which I refer you to my surgical lectures, in the case of a wagoner who had his leg lacerated & had been in that state some time (without medical or surgical aid) without having much

effect on the circulation. In Dr. Stocain's case on a (22)
S. M. examination, the great irritability was thought to
be owing to the ossification of some of the arteries near
the heart. As in some dispositions, the mind sinks un-
der small misfortunes, while others rise in proportion
to adversity: so it is with regard to the heart & blood-
vessels & life may appear strong there when it is near-
ly extinct in other functions. This may lead into conside-
rable error. In Plethoria these appearances are an inflamma-
tory action to the last. & the Synocula is found in Chronic
complaints as in the cases of Dr. Potts, & John Leysh. in
the last the small, frequent & tense pulse was to be observed,
on the day of his death. Now were we in the practice of the
Chinese you may conceive the danger our patients would
be exposed to. When Physicians are called there to ladies
of quality, they are not allowed to ask them a single
question, but must make up their minds from feeling
the pulse; the lady sticking her arm through a hole in
the partition. - I wish to impress upon you the importance
of distinguishing between an irritable & an inflammatory
pulse. Some of these quick pulses it is impossible to
reduce, Several yrs. ago one of my students asked me to

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The first of these is the
the second is the
the third is the
the fourth is the
the fifth is the
the sixth is the
the seventh is the
the eighth is the
the ninth is the
the tenth is the
the eleventh is the
the twelfth is the
the thirteenth is the
the fourteenth is the
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the ninety-seventh is the
the ninety-eighth is the
the ninety-ninth is the
the hundredth is the

feel his pulse. It was active & bounding, this he told me ⁽²⁵⁾
was natural, & when he was sick the D^r attempted to
reduce it by V.S. spare diet, & Digitalis, but still it would
keep up. Called to a lady, mother of J. Warner. when I
entered I saw death imprinted on her countenance. She had
been taken with an Epileptic fit, but her pulse was full,
tense, & powerful; I sat down on the bedside; I would recom-
mend you, when you do not know what to do, to do nothing
but as it is expected that Physicians, when called should
do something, I ordered a mustard plaster to be made
because it would take sometime to do it; but ere it was
done she died. R. Dickinson aged 72, came under my
care in a gradual decline. A few days before death she was
almost without nourishment; her mouth merely being
moistened; the fluids on the tongue had condensed & yet
tho' in articulo mortis, with a hippocratic countenance,
still there was much action in her pulse, & considerable
febrile heat: A natural Pulse may often be taken for a dis-
eased one; of this I advise you to be on your guard. if on
their enquiry their general health appears good, it will
be safer to suppose it to be a natural one: there was a pa-
tient at the Alms-house who was bled considerably many



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merely to reduce the pulse, when afterwards, I was (24)
convinced it was in its natural state. Dr. Wistar used to
relate that while attending lectures at Edinburgh several
of them were trying experiments, on some dogs, just after
they had been bleeding one a Physician came in, they wished
him to decide from the feeling the pulsation of the heart, whether
the system was Aethmic or Asthmic; he pronounced it Aethmic.
Thus in Dyspepsia the nervous weakness causes the heart
to palpitate. Persons of very reduced constitutions often acquire
an extremely irritable pulse. I was acquainted with a Dr
Andersson who in a nervous weakness would be as much
excited by a drink of milk as is customary by a glass
of Brandy. This much for the Pulse appearing strong,
when it is ~~strong~~ contrary, we can take a directly oppo-
site view with equal correctness. I mentioned when treat-
ing of Typhus, the case of a gentleman who was attacked
with Hemorrhage from the lungs, pulse very feeble,
but other appearances were contrary, constitution
strong, countenance had not that debilitated appearance
blood that flowed was florid, under these circumstances
I employed the lancet, & with the greatest advantage.
Cases of this kind have occurred to me more than once

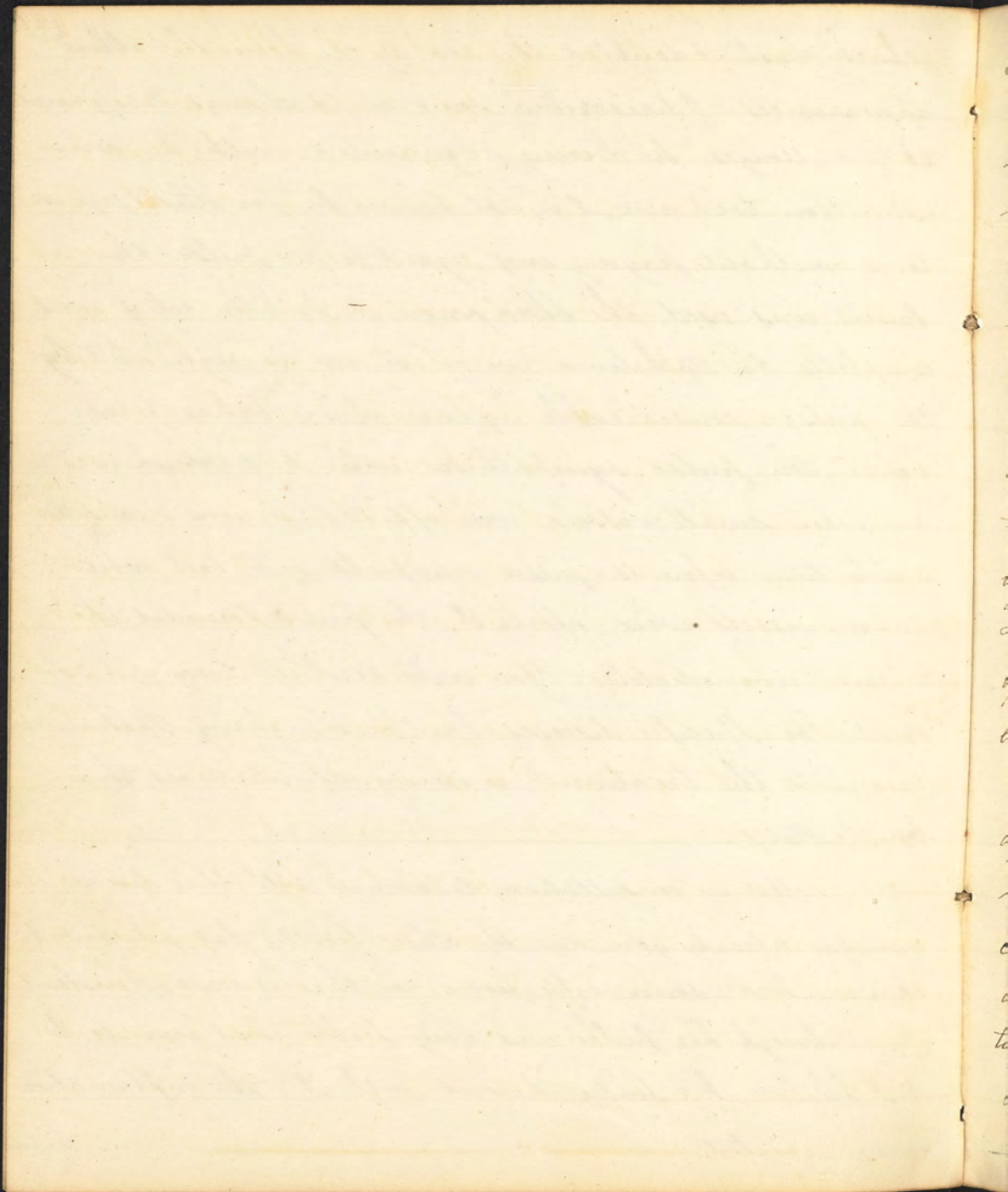
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25.
it is necessary to take in view the symptoms collective-
ly & judge from them. In inflammation of the bowels or the
Peritoneum, the pulse is deceptive, I look then elsewhere
as to the countenance, distress & pain in the abdomen, es-
pecially if it increases on pressure. I was called to a young
lady precisely in this situation; pulse low, I directed her
to be bled; & the bleeder to be regulated as to the quantity
by her capacity to bear it, on my next visit, I found
that he had taken very little, thinking she was too weak
but the symptoms continuing, I determined to try it my-
self: I opened a vein & watched her closely, at the same
time frictions were used externally, the pulse grew strong
as the blood flowed; she recovered, had I been guided by
the pulse the probability is it would have ~~terminated~~
terminated fatally. While speaking of the tenderness of
the abdomen on pressure, I will observe, that it may
continue after all danger has ceased as in ~~effluvia~~ effluvia &c.
But it is different & requires different treatment from
Periton. Inflamm. By the request of Dr. Manges, who at
that time was indisposed, I was sent for, to the wife
of a French Gentleman, I found her with much pain in
the cavity of the abdomen. pulse appeared very feeble,

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which last I doubted the reality of, from the other ⁽²⁶⁾
appearances. I prescribed some mild things, & repaired
to Dr. Monges: he being acquainted with her con-
stitution told me, I must prescribe for other symp-
toms without paying any regard to her pulse: the
lancet was used, the blood found 144 & the relief was
complete. In Ophthalmia we must not be regulated by
the pulse, considerable inflammation takes place
before the pulse sympathises with it. Dr. Rush used to
say when small vessels were affected it was a conside-
rable time before the pulse sympathised, but when
large vessels were affected, the pulse sounded the
alarm immediately. You will recollect I am an ad-
vocate for Specific diseases. In the sloughing Ophthalmia
I regulate the treatment more by appearances than
by the Pulse.

1818. Called in consultation to a nurse with this disease. The
eye was already gone and the other pretty far advanced;
having had some experience in this disease, I instant-
ly although her pulse was very feeble, had recourse to
V.S. freely. her pulse rose it with it, the inflammation
was arrested.



The emotions of the mind have great influence over the circulation. A young lady told me she was sure she got an extra-bleeding, by feeling somewhat embarrassed on the entry of the Dr. External heat will also have a similar effect: one of my children was attacked with croup, his pulse appeared too frequent, I was about to bleed him, his mother remarked perhaps it was occasioned by the warmth of the room. I waited a few minutes the room was cooled, it then was slow enough. There is a practice adopted by many Physicians, viz, bleeding to prevent Inflammation. for instance after performing the operation for cataract, they will take some blood: but I think bleeding, so far from preventing it has a direct tendency to promote it. this may appear a paradox. I thus explain it. By the operation you cause a weak part. & by V. S. you increase the irritability of the system, & it falls on the weakest part. Some of the most violent inflammations have taken place in constitutions previously broken down with debility.

1 Chicken water.

But up the chicken & wash the bones. Boil it
in a gallon of water, to which add a little salt.

Mint tea may be drank at the same time.

Cholera Morbus

(28)

Consists in vomiting & purging of bilious matter, attended with spasms in the bowels, limbs & sometimes the abdominal muscles. I have seen the sunken eye & stridulous voice, feeble pulse, cold, clammy sweats insatiable thirst for cold drinks, come on in a few hours which if indulged in are always injurious. "What thou doest, do quickly" is a very appropriate maxim. Free dilution with mild drinks. Sydenham recommends Chicken water as an excellent remedy, this may be continued plentifully even if it is not retained. The effects of Cholera, may I think in some measure be Prophylactic, but which continuing is too severe for the system. Nature in this appearing a rough Dr. whose motions it is necessary to watch, when she is discharging bilious matter both by the mouth & by stool it is not safe to check it immediately, but the greatest attention must be paid. It is a disease that generally prevails in warm weather, affecting both sexes & all ages but is most fatal to infants, in Adults when Idiopathic & under proper treatment it is seldom fatal. In adults its attacks are somewhat sudden, but generally the symp-

(29)

tions are felt several days previous as spasms in the bowells, cramp in the limbs, a feeble pulse & a craving for cold drink. I have been surprised at its rapid effects. I once was called in consultation to the wife of a German, who had been attacked on the morning previous with profuse vomiting, & purging, so violent was it that her strength was exhausted, countenance shrunk eyes sunk & voice stridulous. In such cases no time ^{is to} ~~must~~ be lost, the treatment must be according to the disease. But in common cases when there is hurrying & vomiting without that prostration, simple treatment is the best & one of the best things is Chick-
en water. & continuing the use of it even if it should be thrown from the stomach. Tissot says it is a disease to be cured by drinks; but in addition if the patient evacuations be profuse & the patient loses strength, recourse must be had to other things. Take care you are not led into an error: remember the intestinal tube may be contracted by spasm: I have seen the muscles contract so as to cause the patient to scream with pain, this contraction may take place with the intestines, beware of confounding this with inflammation or Peritonitis. I will say some-

1. I generally use the following formula. viz.

℞. Sal Tartar — ℥j

Agg. Menth — ℥iv

Ts. Opii — grt 80

Sacch. Alb. q. s. facere dulcem solut.

Sig. A table spoonful every hr or ½ hr. till relieved.

thing of the resources. External heat may be used 130
advantageously, by means of flannels wrung out of hot
spirits, to which some pepper has been added. Sinapiens to
applied to the stomach & extremities, In violent spasms 'Laudanna
grt xxx repeated every $\frac{1}{2}$ hr. till 90 grs. are taken. may be used.
But I do not like this repetition so frequently as some,
to relieve pain as the patient may be destroyed. Dr. Wis-
tar was opposed to its use except as a dernier resort. He
thought it acted so as to paralyze the bilious secretions
& so he preferred spiced brandy, a teaspoonful repeated
frequently till the pain is relieved. I never saw a case
requiring V.S. Stimulating frictions are sometimes neces-
sary in the low forms. Tepid drinks are better than cold.
The thirst in the prostrate forms is diminished by
stimulants. Saline draught. Lime water, Seidlitz powders
when the bowells will bear some evacuations.

If Cholera is arrested too soon a morbid fever most-
ly arises, but when the system is manifestly sinking
under the profuse evacuations, it will be necessary to
choose this as the lesser evil. Fever is preferable to these
extreme evacuations, at the same time allaying spasms
by means of opiates. after it is arrested it will be neces-

Rhubarb 2 tea Spoons

Nutmegs 1 tea ———

To be put into a tumbler of boiling water

sary to prevent bilious accumulations & the debility
of the bowells, for this ^{and Hemorrh} Rhubarb with noagusia maybe
used. Seidlitz powders I am fond of giving in the effe-
rescing state, sometimes evacants may be given com-
bined with Sonics as Columbo, Ginger, &c. Diet should
be plain & nutritious. These are for the common
forms, different cases may require different treatment
Calomel may be given in small doses ^{1/6, 1/8 to 1/4 gr} when evacants
are required. There is another remedy I have seen pre-
scribed with great advantage. Called to a case where
there was ^{some} ~~great~~ prostration, feeble pulse, clammy
sweats on the extremities, evacuations not alarming
but great debility supervened without any thing taking
place to explain it, pulse barely perceptible at the wrist
thirst insatiable bowells constipated. Dr. Physick saw
him with me, wine had been ineffectually tried; he first
posed Nitr. Ferul. it was frequently given in doses of a
few ^{rectified} grs & the patient was restored. This is a remedy
which may be used with advantage, especially in cases
when others fail.

I wish to impress on you the importance of distin-
guishing between different diseases. Dr. Wistar said

1. Vid. Sydenham & Tissot on this subject.

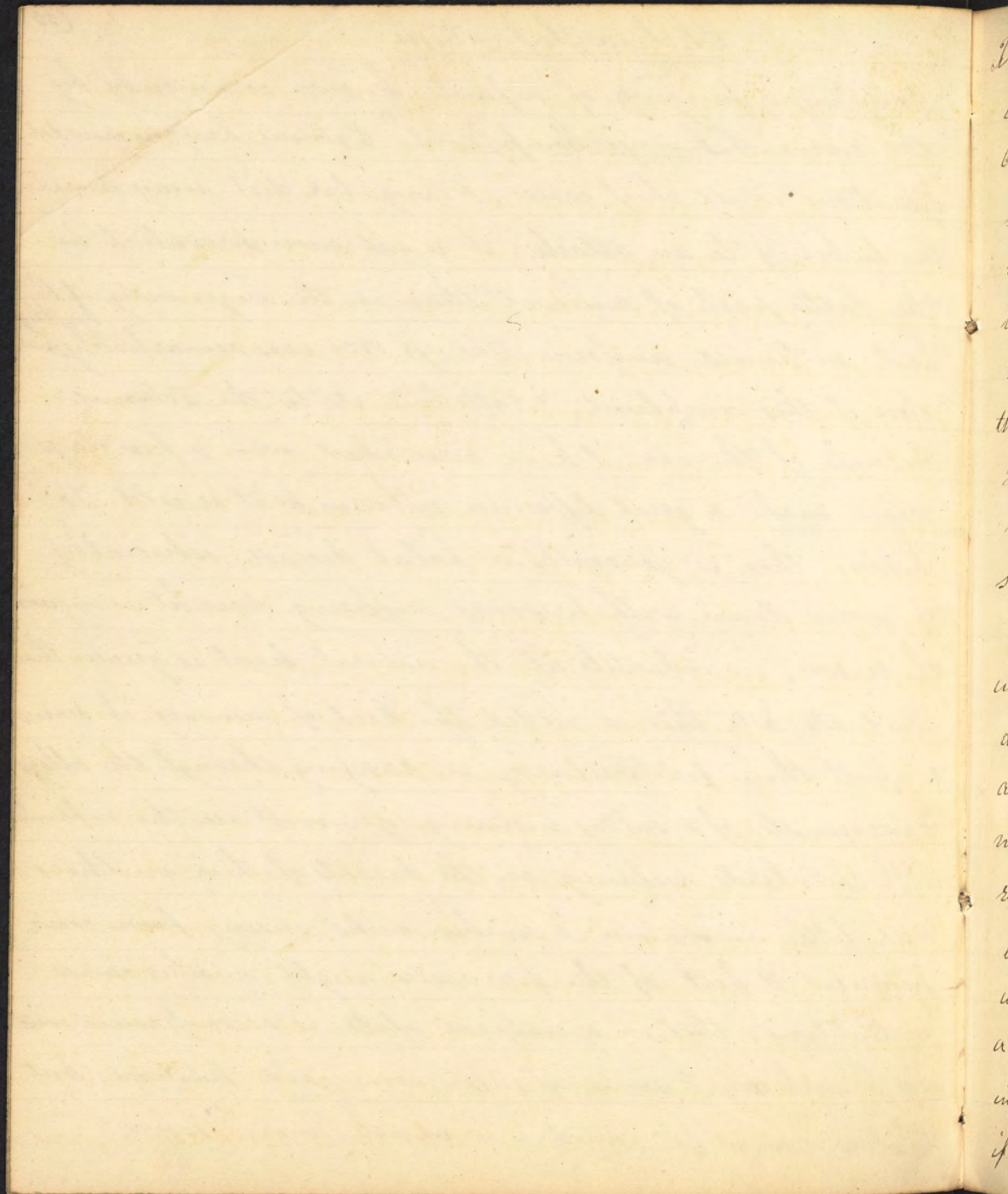
the most important consultation he ever attended ⁽³²⁾
was in a case where a patient had an attack of what
the Dr. a young man thought was dysentery I was
giving Ol. Ricini. After Dr. Wistar had made his
inquiries I ascertained the nature of the disease
they retired when Dr. Wistar convinced his colleague
it was cholera; the treatment was changed & she
recovered. In extreme exhaustion if that desire for cold
drink is gratified it generally does harm, though to this
there are exceptions; a child had been attacked with
Cholera, it resisted all means that could be tried to allay
the irritability of the stomach. Dr. Wistar told me to try
a teaspoonful of cold water given frequently. it was done
the irritability was allayed & the child finally recover-
ed by going to the country. As to the C. of India I can say
nothing practically. A surgeon who had been on board the Constitution
told me that after they left Washington, Johnson's work on this subject
was received there & sent by express after them, he recommends bleeding
freely in the first stage. When they were in the tropics it broke
out & a fair trial was given but unsuccessfully; numbers died.
Information was requested of the Physicians of the
British troops but he could give none.

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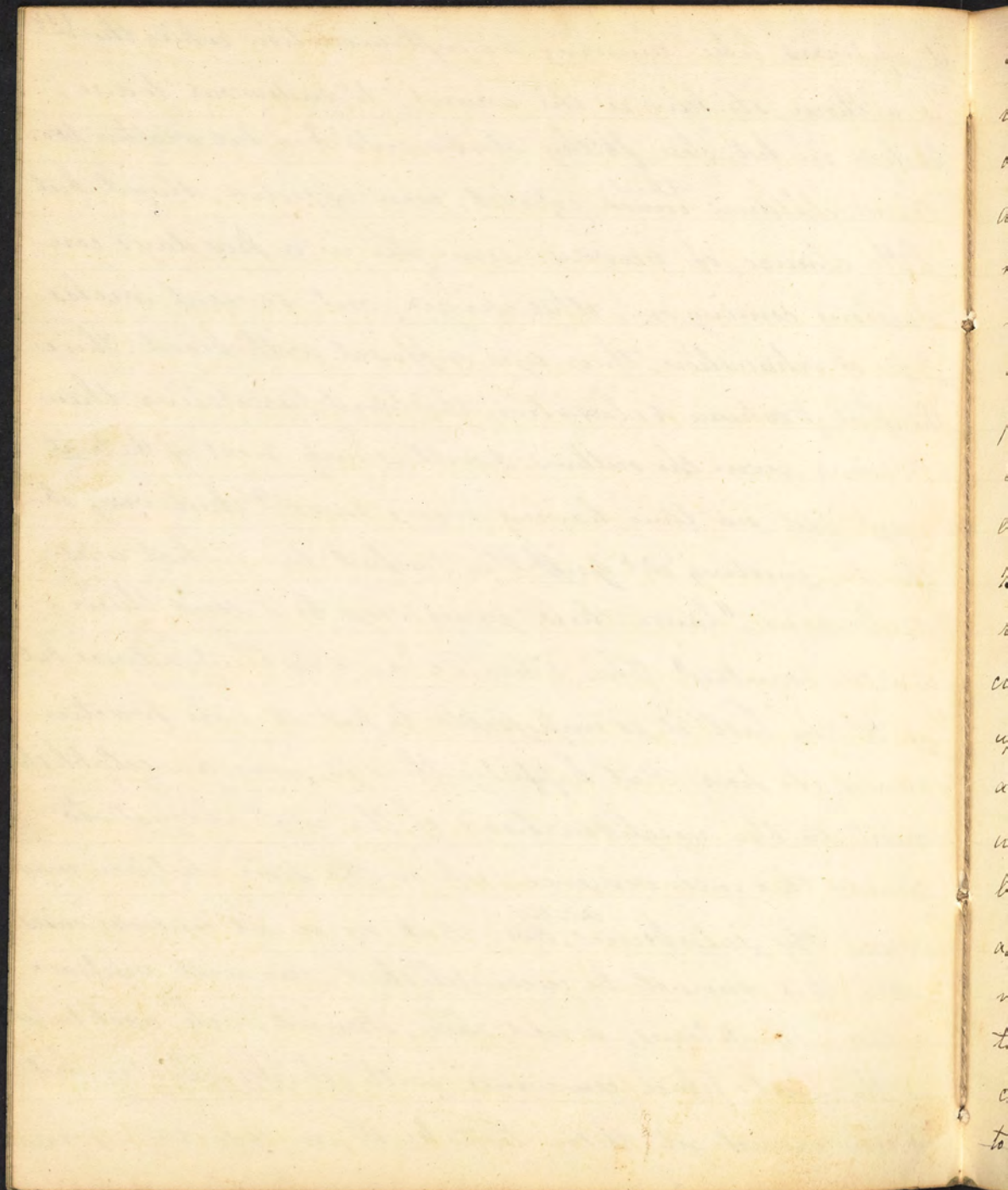
Cholera Infantum

(35)

Vomiting & purging of infants known commonly by the name of "Summer Complaint." Extreme heat in crowded situations is its chief cause, & irregular diet may increase the liability to an attack; it is not more prevalent in the latter part of summer than in the beginning if the heat continues uniform. The yr. 1806 was remarkably ^{healthy} and clear of this complaint, & I attribute it to the extreme coolness of the air. I have remarked even a few days would make a great difference either in heat or cold. To children this is generally a fatal disease especially if worn down with previous suffering. Now let us inquire the reason, in infantile life the natural heat is greater than in adults & to this is added the heat of summer; it seems to affect them particularly, in ranging through the alleys & narrow sts. of a sultry morning you will see the infants with their heads reclining on the breasts of their mothers with little animation & sunken cheeks arising from confinement & heat of the previous night; another cause is dentition; this in a natural state is accompanied with Diarrhoea & seemingly for some good purpose, but Cholera may be added & is much more severe.



It appears like removing an inflammation while there ⁽³⁴⁾
is a thorn sticking in the wound, to endeavour to cure
Cholera in hot, close, filthy apartments & in hot weather too.
Hence children ^{thus} ~~much~~ exposed, when affected, stand but
little chance of recovery; some die in a few days con-
vulsions coming on, other linger out several weeks
& die of exhaustion, their eyes suffused with blood. This is
the effect of extreme relaxation. the blood percolating them.
Having given the outlines I will speak next of the treat-
ment. At one time having many cases, & those very ob-
stinate, meeting Dr Griffiths, I asked him what was
to be done. "Lance their gums says he & send them
into the country". This I hailed as excellent advice but
as to the last it is impossible to put it into practice
among the poor. But happily there is now an establish-
ment in the neighbourhood of the city adequate to
remedy this inconvenience, where the poor children may
enjoy the salubrious ^{country} air. But we must consider cases
when this cannot be accomplished. We will suppose
a case: symptoms, a cold skin, shrunk neck, weak pulse
in the first place commence with chicken water, but
if you cannot get them to take it in sufficient quan-



(35)

tics, small doses of Seltzer Water will be found very grateful. I have it generally put up in $\frac{3}{4}$ ss vials or the soda powders divided so as to be given in small doses. If the stomach reject this recourse must be had to external applications. The spiced plaster will be found of great advantage; in preparing it for children leave out the pepper or add it in small proportions. To change the secretions of the intestinal canal & liver I have used the Syr. Elix. Cal. a teaspoonful every 2 hrs. ^{or 3} till the discharge is effected. Cal given in $\frac{1}{6}$ gr doses every $\frac{1}{2}$ hr. ^{or hour} till several grs are taken has been recommended by Dr. Miller. If the feet are cold and clammy put on woollen stockings & attend to keep up the warmth of the extremities at the same time admit the free use of cool air: Lancing the gums will often remove the irritation of dentition. A Blister behind the ears I have ~~often~~ found of the greatest advantage. it is an application I have learned from nature. I observed that generally when a child was teething sores were produced behind the ears; when I commenced practice, in some instances I endeavoured to dry them up & if I succeeded it produced unpleasant

Land: — gtt vi

Tect. vst. ppt 3 ijs

Aqua. Cinnam. 3 ijs

Gum Arab.

Sacch. Alb. aa 3j

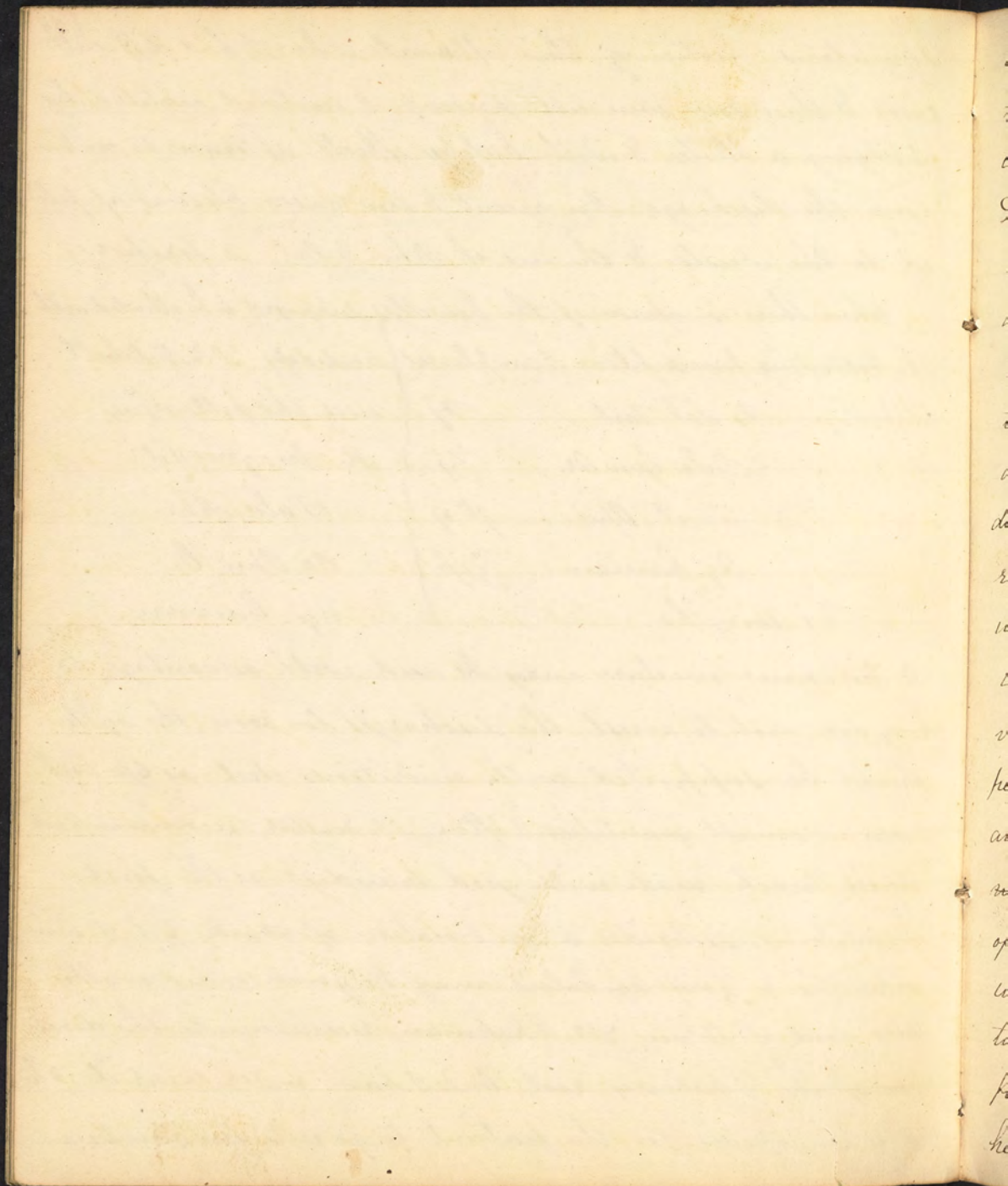
dose Teaspoonful every hr. 2 or 3 hrs. P. R. nota

symptoms: noticing this afterwards when I had difficult cases & these sores were not present, I imitated nature, by applying a blister & with happy effects afterwards continuing the discharge. In recent & low cases blisters applied to the wrists & the use of Rhei & Cal. is proper.

When there is spasm of the bowels, supposed to be attended with The following prescription I am pleased to use the following
with. Viz. R. Cal. Tart ʒj
Pulv. Gum Ar. ʒj
Tinct. Opii qtt ij
Ag. Cinnamon. ʒij
ʒj every hr.

acididity Dr. Mitchell
R. Magnes. Vol
Pulv. Rhei
Dr. Opii. C.
Ag. Cinnamon.

A testacious mixture may be used with advantage taking care not to arrest the discharges too soon. the system should be supported with nutritious diet as Esp. beef given in small quantities & often. Dr. Wistar recommended Milk Punch made with good brandy: as the first symptoms subside a combination of Bark ʒss. P. Cinnamon ʒij & ʒviij Ag. Balsis may be given occasionally also good P. Wine. Dr. Chapman recommends the decoction of the Dewberry root, but I have never tried it. When it is impossible for the patient to go into the country



it was my practice to tell their mothers to take (37)
their work to some of the public squares & keep their
children in the fresh air all day. Or if they lived near the
Delaware to cross, taking them into the shade.

wished me to give him some advice to preserve the
life of his child, he had lost six with the bowell complaint.

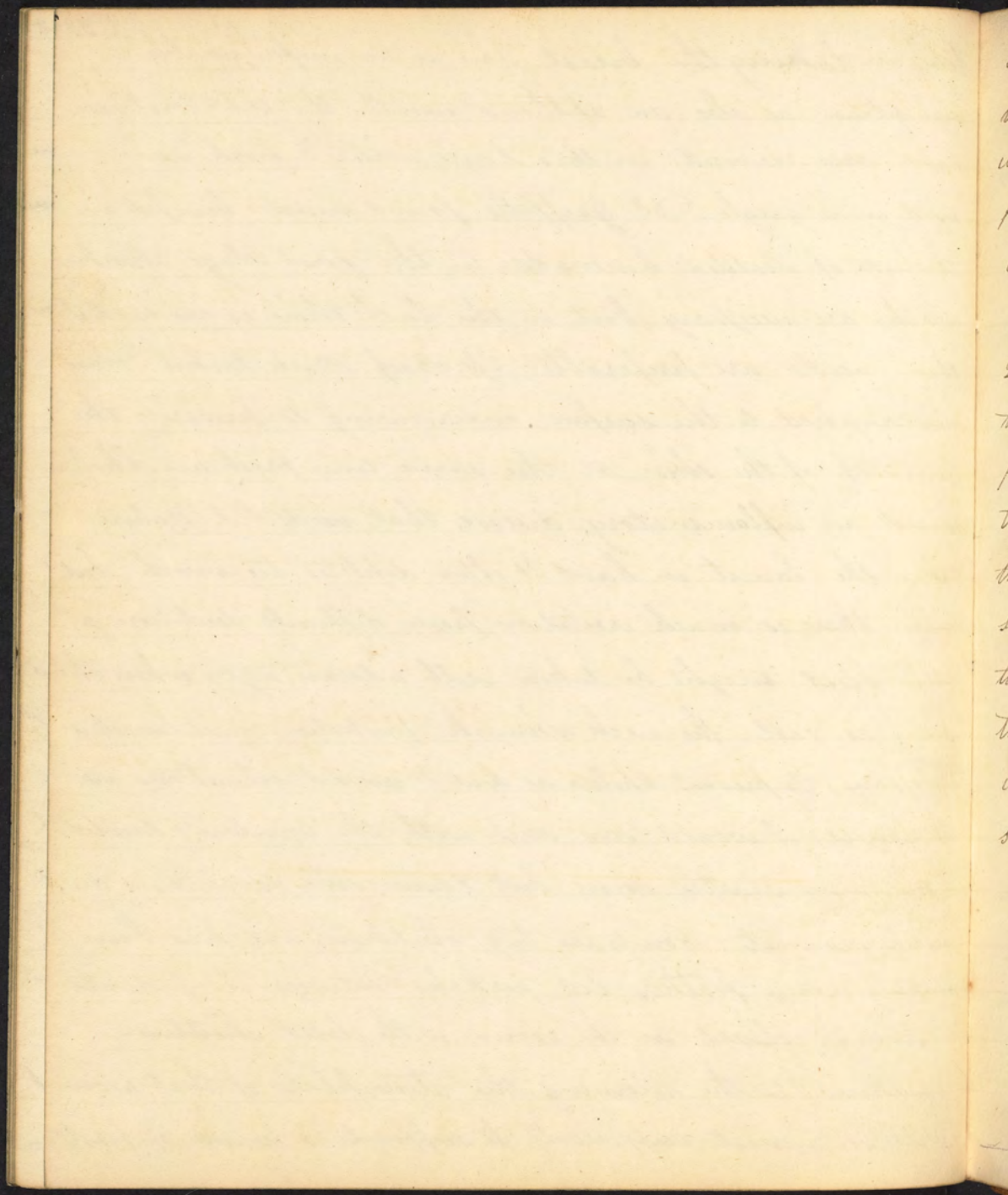
I found they had been in the practice of feeding
them on vapid aliment, thus keeping their bowells
debilitated. Supposing the milk of the mother bad I
directed that a nurse should be procured that she should
refrain from vapid articles & take ginger tea. That in
warm weather the child should take some aromatics,
wine & also animal food: this completely succeeded
very frequently I was called, they thought they could
perceive incipient disease, they wished to know whether
any medicine ought not to be given, but this I steadily
neglected, rejected. Retiring to the country itself will
often cure them, ^{when} in the last stage. One of my children
was so low some of my acquaintance advised us against
taking him to the country, thinking it impossible
for him to live during the journey: but I thought if
he died it mattered not where: so we took him to

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Burlington. & it was with extreme difficulty we could preserve life during the journey. he was laid on a pillow. & fanned the whole time. that same evening while laying on the loss of his mother signs of returning animation appeared. He recovered. It sometimes assumes a chronic form with great emaciation & debility, when in this state some striking facts are related have occurred of their recovering from indulging their appetite. They are generally inclined for salt food. Dr. Wistar related the cases of several recovering by these means. One was carried into the room where its patients were dining, it took a notion to have some of the black skin of the ham, it was given to it & it recovered another was anxious to have some butter, it was gratified & soon recovered. one was reduced to a very low ebb & wanted a salt herring, & would not be satisfied without having one continually at its mouth. Cured. Dr. Wistar used to tempt them by placing things they were fond of in sight but some had no inclination at all to eat. I have ordered them the Ess. of Ham ʒi at a time & I think with advantage; also Ess. of beef Mad. Wine. In some there is a voraciousness perceivable

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tible in taking the breast. This is an unfavourable symptom, as also an aphthous mouth, tho' the worst case I ever saw recovered, in this Lime water & bark were used as a gargle. Dr Griffiths found much benefit in the use of scalded lemonade: in the first stage absorbent earths are necessary, but in the last there is no need of them, acids are preferable. Esp. Beef. Bark Sacket Flannels applied to the surface endeavouring to preserve the warmth of the skin at the same time fresh air. Cholera is not an inflammatory disease that needs V.S. Nature takes the lancet in hand & often depletes too much, but when there is much irritation from difficult dentition a little blood might be taken with advantage; when the skin is cool, the neck shrunk, prostration &c. no lancet is ~~not~~ necessary. To prevent Cholera as heat & crowded situations are its causes; I would say sleep with the windows hoisted. This may startle some but I have seen advantages derived from it. Compare two children. one has been sleeping in a feather bed perhaps between its parents & several others in the room, with closed ~~shutters~~ windows. In the morning the atmosphere of that room will be almost sufficient to suffocate a person on first



entering. The child will be listless, all its animation ⁽⁴⁰⁾ is gone & it appears on the verge of an attack with cholera. The other which has been sleeping on the floor with a draught of air through the room will be in perfect health & spirits.

Let children sleep hard & cool during the night. Diet is also of great importance, improper food deranges the bowels. Mild nourishing diet is best. rapid food predisposes to cholera, and administer small quantities of wine. I have been in the practice of lancing the gums before they become much tumid, thus saving the child much pain: some mothers object to this, thinking it makes the gums hard & causes them to cut their teeth with greater difficulty but it is the very reverse. The cold bath is a considerable Prophylactic giving tone to the system.

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Dysentery

(41)

Is an inflammation of the mucous membrane of the intestines: you may inquire what proof we have of it: I say by referring to the symptoms. In inflammation of the Schneiderian membrane we have first that thickening, then a secretion of mucus; also in the lungs mucous matter is thrown off & sometimes tinged with blood.

This is especially the case in Pneumonia towards the latter stage there is considerable expectoration of dark matter bloody mucus; when it terminates favourably, this is so much the case, the inexperienced practitioner may suppose B.S necessary. In the alvine canal there is the same structure, & from the bowels the same mucous discharge. Inflammation of the serous membrane is more dangerous than that of the mucous, this last carries the lancet with it, discharging great quantities of mucus, this may be tinged with blood owing to the mouths of the vessels being opened by the slightest abrasion. Dysentery is best understood by the country Drs for there it frequently prevails epidemically and is sometimes very fatal but in the city we have never had an epidemic of this kind.

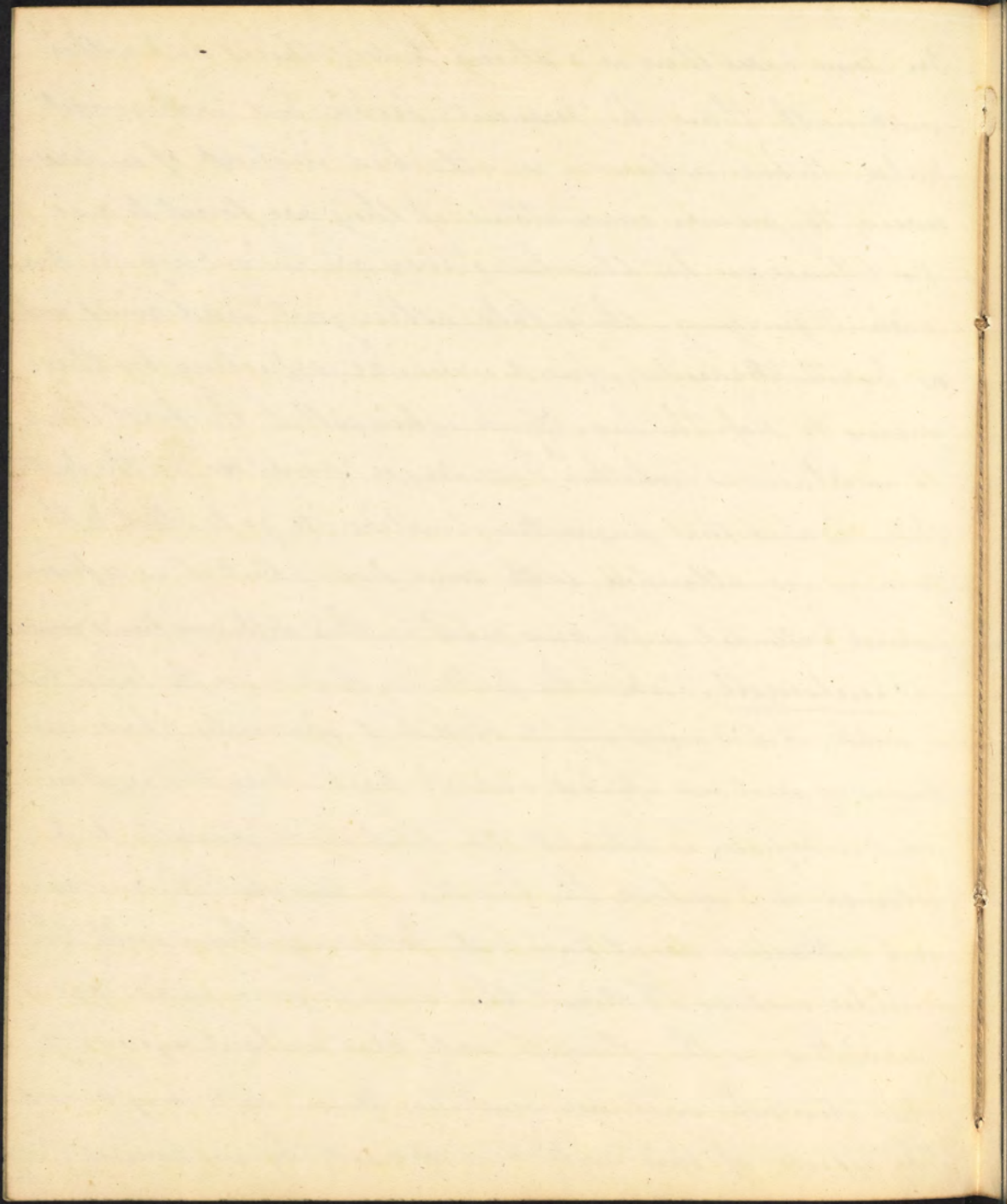
The fatality that has attended it in some neighbourhoods is I think owing to some other disease being combined with it; thus it may be united to bilious fever. In one part of Chester Co. the mortality was as great in proportion as the Ty. Fever in Philadelphia. The symptoms are pain in the bowels, inclination to go frequently to stool, evacuations small & discharged with much pain, stools mucous & tinged with blood, sometimes having a curdled appearance called by some that of scraped guts; these increase if not checked by proper means & the patient dies, sometimes in a short time, I have known death to follow in 5 days, sometimes it assumes a chronic form especially with persons going from North to the tropics. It sometimes comes on with rigor but this is not often the case. Sometimes ushered in with active pulse requiring the lancet at others the contrary. - It is never attended with soreness or pressure of the abdomen like inflammation of the Peritoneum. I ground my Prognosis on the impression made by medicines on the canal in producing natural stools especially if the pulse is good & patient free from the Erythematous tongue. I consider Dysentery a febrile disease of the system combined with an affection of the mucous membrane.

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In some cases there is a strong pulse; this I had rather meet with than the frequent, feeble but malignant pulse. When a person is attacked instead of endeavouring to procure evacuations if they are forced to rise 5 or 6 times an hr. thinking they are labouring under violent purging, they take astringent medicines, such as burnt Brandy, spiced wine, &c. expecting by these means to stop the lax. Hence when called the first thing to ascertain is whether ^{it is} Dysentery or Diarrhoea, in the last there is also that frequent inclination to go to stool & the discharge is attended with some pain, but it is copious natural & attended with some relief, in this, differing from Dysentery.

Treatment. When the pulse is strong use the lancet but if weak, if it is necessary to bleed do it sparingly. I have seen leeches of great use applied over the part where the inflammation & pain is situated. The first object generally to be obtained is to unlock the bowels. in common the mercurial cathartics are at first best, following them with the milder ones as M. Ricini this may be given in as large quantities as the stomach will bear without injury. If the stomach will not bear this Epsom Salt may be used. The effects of this will be increased by combining



with it a small portion of Ipecac. or tart. Emetic

If the stomach is very irritable an emetic may first be given then a dose of calomel & Salaf, following it with Epsom Salts \mathfrak{z} j every hr. till a passage is effected.

at the same time some Laudanum with starch to allay the spasms; mucillaginous drinks ought to be used plentifully, a decoction of mint & mallows, a solution of Gum Arabic. An evacuation is generally obtained in 24 hrs. The patient may then take some rest; an opiate may be given combined with a cathartic & something tending to the skin for this purpose I have given at night the following

Rx. Pulv. Opii — grs 1-2-3

Ipecac — gr \mathfrak{j} ss

Cal ppt. gr x.

These are for the early stage. Salts given in soda water will have a good effect or in addition an oz. of Epsom Salts divided into 4 doses, to each of which add \mathfrak{z} j of Ipecac.

Other cases may require other remedies, the oil of butter prepared by washing the salt from pure butter with cold water, then pouring over it hot water, skimming off the oil & giving it in doses of \mathfrak{z} ss is very useful. it acts as a laxative

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& allays irritation. In some cases it is necessary to combine
 tonics & cathartics. For this the infusion of Bark & Rhubarb,
 Ginger & Bastor Oil, Columbo &c. Dr. Griffiths combined Rhe-
 barb with an opiate in the oleaginous mixture. In the
 early stage great advantages may be obtained by bleeding
 either by leeches applied over the abdomen or blisters
 applied to the same. Blisters have been applied to the
 wrists in bad cases with advantage, in applying them
 to children it is necessary to defer them longer than in adults
 on account of their restlessness. There is a remedy I
 have not yet mentioned that I have in high estimation
 viz the warm bath; it may be used several times a day
 the patient remaining in as long as comfortable, it relaxes
 & favours the operation of the medicine. It might be suppo-
 sed that purging was unfavourable to inflammation,
 of the mucous membrane but experience has proved
 the contrary though it has its limits. I sometime ago
 attended the wife of a gentleman, her system was so
 low, Cathartics were left off & endeavours were used to sup-
 port it. Wine & Whisky was given & wine itself, opiates to
 allay spasms & nutritious diet. A Quaker Dr. lived in
 the neighbourhood who insisted on using cathartics, we

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resisted, her system finally reacted, bowells opened. Recovered
When combined with Intermittents Bark may be used
with the greatest advantage, curing both. Dr. Gardiner near
Darby when dysentery was epidemic there used bark with
great success. he then supposed that all dysenteries might
be cured by it, but was mistaken. I have found the stools
to change, assuming a bilious appearance the patient
dying shortly after. Sometimes you may be flattered by
the stools assuming a natural appearance when withdraw-
ing the medicines their old nature will return. When
attacked myself I found the greatest relief from cathartics
they allayed that distressing Torment. Mucilaginous
drinks have a good effect. Some Drs have a great dread of
opium but for my part I do not know how I should get
along without it. Dr. Cole told me if he wished to
procure an evacuation, he could do it more readily by
giving an opiate the night before. Dr. Physick says there are
no medicines able to cure it. and if any thing is able to
relieve it, it is pre V.S. Spets. Tereb. had been highly
recommended, though in Wall's family it had a fair
trial by Dr. Physick on 3 children, but they all died.
In the latter part of an attack the anus may become

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excoriated, by the frequent discharges & by the tube of the injection pipe, this will cause much pain there & also in the neighbouring parts through sympathy; it will be well to suspect this if the distress continues after the discharges are natural; the applications found most useful are Laud. or Opium mixed with Lard. The diet should be of mild farinaceous articles though some practitioners allow flatulent articles. Tissot gives ripe fruit.

Chronic Dysentery. You will frequently meet with this & chronic diarrhoea. In Dysentery the system becoming accustomed to it in some measure, the patient may be supported weeks & months before he is worn out. In 1820 I was called with Dr. Otlee to an inferior officer of the frigate Constitution who had it for 8 months: various remedies had been tried without effect. I observed the great want of heat & action in the skin, to restore this I considered the first indication; the warm salt bath was advised to be used daily, the functions of his liver being disordered $\frac{1}{6}$ gr. Cal. was ordered every 2 hrs. every other day till 2 grs were taken in the intermediate days 3 ss of infus. Rhei et Cascariillæ which I think highly of in those cases; this course was continued till the discharges became natural. Flannel was

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applied to the surface, under this treatment he recovered in a short time. Dr. Hays' practice of applying a flannel roller over the whole surface, I think highly of. Diet is of the utmost consequence, a little irregularity may even, on a recovery produce a relapse, though there are exceptions to this.

A lady from the West had been afflicted with Shon. Dys. a long time; she had been treated in the country in the way in which relief is usually expected; the greatest attention had been paid to her diet; she abstained most rigorously from all fresh fruit & vegetables, but still her disease continued, before she called on me, she indulged her inclinations, eat freely of fruit, I was called & advised her to abstain, but she told me she had tried it in vain and thought she felt better under a contrary plan, this she pursued & recovered. Chronic Diarrhoea is more frequent than dysentery the discharges are frequent & profuse, all aliment is soon carried off, great emaciation & want of action on the surface takes place, to exemplify it I will relate a case attended by Dr. Wood & myself. John Cooper a merchant of this ^{city}, about 25 or 30 yrs. of age in 1818, had an attack of Hepatic Colic, from which he was relieved by a mild course of Mercury

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In the fall of the yr. he went to the West on horse-back
on the road he lived very irregularly sometimes eating
two meals a day, & exposed to all kinds of weathers &
much fatigue. A disease was produced, severe, protracted and
dangerous, on his way he was forced to apply for medical
aid, but without much relief. When he arrived in the
city, he applied to Dr. Wood, this was Dec. 1819. complained
of much pain above the pubis, bowels irregular, urine
limpid & in excessive quantities; the Dr. gave some direc-
tions & did not see him for several days. In the interim
by the advice of his friends, he took several strong purges
The Dr. was again sent for, his discharges were excessive
perhaps he rose 20 or 30 times in the course of the night.
his evacuations resembled tar. they had the appearance
of being mixed with dissolved blood; he complained of great
pain in the back & bowels, & knees, so great was the pain
in the last place, he thought he would rather suffer
amputation if it would relieve it than endure it. pain
above the pubis was gone, had much flatulency, appe-
tite not destroyed, tongue furred. his discharge of urine
had given way to his diet, pulse seldom slower than 100
He was somewhat hysterical, emaciation so great his bones

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appeared to be projecting through the skin at the
 back & hips, it seemed surprising how in such a
 skeleton the bowels could secrete the quantity they did.
 He was put on a diet of Beef, Mutton, oysters, eggs & coffee.
 Fresh fruit & vegetables were entirely laid aside. To
 correct the functions of the liver, Cal was given in
 $\frac{1}{4}$ gr every $\frac{1}{2}$ hr. till gr iij were taken, an opiate was or-
 dered at night, but it disagreed with his stomach. Oil
 of butter was given \mathfrak{z} ss every 2 hrs. every other day, (Calomel
 being given in the intermediate days) this gave him some
 relief for the first few days, but his stomach then
 rejected it; a blister was then applied to the abdomen,
 this gave so much relief the opiate could be taken,
 as this blister healed another was applied. The warm
 salt bath was used with the greatest advantage, when
 first used, he was so weak as to require support in it,
 at night grt xxx Tinct. Opii were taken, the bath
 operated wonderfully, in the course of a few days the
 evacuations assumed a natural colour. Astringents were then
 used an infus. Galli in Brandy. Infus. Cascarella &c.
 Recovered; afterwards he had ^{several} two or three relapses
 but was restored by the same remedies.

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From this case you will see the necessity of first promoting the action of the skin, by means of warm bath, flannel to the surface flannel socks, ^{and} if necessary Cayenne Pepper may be put in them, also attending to the liver, if that is deranged, Cal. may be given in small doses attended with Tonic & Laxative medicines, for this Rhubarb stands prominent, but astringents hold a distinguished rank. Spiced Rhubarb, though not purely astringent is much employed in doses of a desert-spoonful with gr. x of Laud. Syrup of Galls made by taking Galls ℥ij French Brandy ℥v. put in a cup with some loaf sugar. laid over it on some wires, set this on fire till the alcohol is consumed, when the sugar has melted down supply its place with more. ℥ss for a dose. Dr. Hine, Tonics with Astringents, for this the Decoction of Cascarella will answer in doses of a wine glass-ful 6 or 7 times a day or pure tonics. Quassia & Columbo are all very useful. Before the case of Cooper, a lawyer applied to me, the same remedies were used except Cal. & with success. I think I never had a more satisfactory case. He had much done for him in the country Westward without effect. He came here much discouraged; his discharges, being natural, Cal. was not

1.

Ry. Test. Ost p[er]t. — 3vj

Tulb. Gum Arab.

Sack. Alb. — aa — 3ij

Tinct. Kino — 3ij

— Cinnamon. — 3j

— Op[er]i — gt. LX.

Aqua Font. — — 3.ij

M. Sig 3j. 1-2- or 3 times a day.

wanting. It is important to distinguish between organic & functional derangement of the liver, but of this I will speak when treating of Dyspepsia. The testaceous mixture with Laudanum is very useful in Diarrhoea. An old lady applied to me who had been labouring under this complaint several yrs. she was not much debilitated, her system had become accustomed to it, but still ~~was~~ it was extremely inconvenient. I regulated her diet & put her on the Test. Mixture. This stopped it rather suddenly. I feared dangerous consequences might ensue, particularly at that time of life, the menses usually subside; I warned her if she felt any disagreeable sensations, particularly an uneasiness in the head (the precursor of apoplexy) immediately to stop the medicine & invite back the discharge from the bowels: but all went on well. The decoctions of Galls & logwood are good astringents. I have tried the pomegranate but it did not please me. — After the heat & action of the skin has been restored & the functional derangement of the liver corrected & astringents given to restrain the discharge, we must regulate the diet or else generally we will fail, all kinds of fresh fruits, even potatoes must be laid aside, living chiefly on farinaceous articles, such as rice simply boiled

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rice milk or pudding. the rice being first well boiled. The French prepare a cream of rice by putting some in a considerable quantity of water, boiling it several hrs. then rubbing it through a sieve, a small pinch of salt may be added & if the patient is fond of it, it may be beat up with Rose Water, & eaten with milk grating nutmeg over it. Rice of itself has astringent properties. Tapioca, Sago. Crackers. may be used, also milk has been found of advantage in some cases, as in one obstinate case the patient drank freely of new milk, with nutmeg, daily. I ordered the milk to be thickened with wheat flour burned in the same manner as coffee. Some boil the flour tied up in a rag till it comes hard, then grate it in milk; this has a good effect especially if aromatics are added. Solid animal food will suit some, such as boiled beef, chicken or mutton. Dr. Wistar was subject to attacks of Diarrhoea, it soon made a surprising difference in his appearance; he told me once, returning home late at night somewhat fatigued, he ordered some ale, it was brought, & though he found it somewhat hard

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he drank it, his bowels feeling comfortable under it he
 repeated it & was cured. Sometime after attending Pritch-
 whose disease not giving way to remedies, he advised
 him to try the ale, which arrested his diarrhoea. P. had
 a second attack, & came for more of the Dr's Ale. Dr
 Physick related a case cured by the use of hard cider in
 the day & John Hart's preparation of bardamon seeds
 at night. On the whole I will repeat the general obser-
 vations. in the first place, attend to restoring heat &
 action to the surface & extremities. Secondly, if deranged
 correct the functions of the hepatic system.
Thirdly, check the discharge by astringent medi-
 cines. Fourthly, if there is irritability by an
 allay it by anodyne enemata & opiates. Fifthly, at-
 tend most scrupulously to diet, for in this depends
 in a great measure, the success. remembering at
 the same time exceptions may arise. I would ad-
 vise you to pay attention to the pointings of Nature
 though it may cross your path. On this point I
 think medical men frequently miss it.

My dear Mother

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Peritonitis or Enteritis

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Is an inflammation of the structure of the bowels. It has received various names according to the part the inflammation seizes, whether covering the liver, cavity of the abdomen or intestines, but I think they are all the same; it is the same membrane lines all. The inflammation of the serous membrane is materially different from that of the mucous, in it the blood vessels of the part throw out a coagulum which produces adhesion of the intestinal tubes, it is much the most to be dreaded, here there can be no discharge, there is no back door where the vessels can relieve themselves or the patient from immediate danger, in this somewhat resembling the brain.

It is rarely Idiopathic much more frequently occurring from blows, wounds or Purpural Fever. But the kind of which I am about to speak is purely Idiopathic; it is attended with fever, pain & distress in the abdomen, much tenderness on pressure, pulse very deceitful as I mentioned when on that subject. In the case of a lady formerly attended by Dr. Monges, pulse was very feeble, but it was disregarded, the lancet was used frequently & freely, & she recovered. and also in the case of a young lady. Mere tenderness of the parts will not warrant V.S. it may arise from Dyspepsia, or Cholice caused by flatulency, it requires the

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greatest delicacy to decide; if it occurs in a dyspeptic patient especially after eating vegetable food, beware of using the lancet but suppose the patient had been taken with pain in the bowels, tongue furred, with considerable thirst & heat great anxiety & distress of stomach, such symptoms continuing for some days & then the patient is suddenly relieved from pain: this you may take for granted as Peritonitis; and again the inexperienced practitioner may be mistaken thinking the violence is past & the danger over, but the skilful one will observe the cold clammy sweats, the hippocratic countenance, weakened pulse, & the patient decidedly sinking, & will find it his duty to warn the unsuspecting patient & family of what is about to take place, for mortification has begun or perhaps sup-
 puration, but it does not always terminate this way, sometimes the pain will continue till the last. I have had several cases of this kind: here instead of mortification, you will find an ef-
 fusion of lymph. It sometimes approaches very insidiously; in one case I was not called till the fatal termination was about to take place. In the treatment the lancet is indispensable and to a great extent, also unload the bowels. Which cathartics shall we prefer? Mild or Drastic? So far I have depended on the mild ones, such as neutral salts, or castor oil, accompanied with de-

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emollient drinks & warm enemata of Barley water, Flaxseed Tea &c.

On the other side of the Atlantic it is said, good effects have been derived from the use of Lpts. Turb. The *modus operandi* they give is that by stimulating the living membrane, it increases the secretions & thus acts as a depletant. This is the same opinion I have of the action of Senega in Group. Here V.S. is used freely, but they rely on the Turb. alone. Fomentations may be employed according to the feelings of the patient, if agreeable continue them. Cups & leeches are of importance & blisters should not be omitted. Some are fond of bathing ^{with} Turb.; but I prefer the Spanish Plis or blisters to the abdomen. These are the general remedies;

practitioners must use them at their own discretion, the warm bath has sometimes been useful by promoting moisture & softness of the skin. Cases. The wife of E. Wilson aged 40 yrs. was delivered of her ^{2nd} child about 6 weeks previous to her death. for the first three weeks all went on well, under the care of Dr. James near that time she was taken with tenderness in the abdomen. The Dr. ordered her to be bled several times & some cathartics to be given, under this she improved, rode out; the Dr. wished her not to repeat it unless she felt better. the next day she rode out again, on her return she had a good appetite & eat a hearty dinner. among other things beets & vinegar. at night she was

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taken with colic: the D^r endeavoured to open her bowels
I to allay the pain of the stomach & intestines: about this time
I was called, pulse frequent, with bilious & stercoraceous vomiting,
tumid abdomen, tongue moist, & natural, very restless. I
prescribed an anodyne enema & the steam bath, from the vom-
iting I suspected Hernia but on examination it was not the case;
to procure an evacuation the purging pills were continued,
at night no better, though the bath proved grateful & the enema
relieved somewhat: afterwards perspiration broke out, & there was
total absence of all pain & there appeared an evident declining of
strength without the symptoms declining. Bowels continuing
obstinately costive, various enemata were used. Cal & Opium
were ordered, the next morning she appeared nearly dead, pulse
barely perceptible, intellect perfectly clear. About 2 o'clock A. M.
(20 hrs. after I first saw her) she died. On examination a uni-
versal adhesion of the intestines was perceptible, some lymph
was effused in the cavity of the abdomen, the cause of the
constipation was evident, the intestines being agglutinated,
the Peristaltic motion was stopped & of course the excretions.
In the case of a son of W. Hallowell, I was not called till
a Medical Aid was unavailing, for a week previous he had
complained of pain in the belly, but not so severe as to con-

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find him, when walking he bent forward considerably and pressed his hand on his stomach. he could not lay on his side. His parents were not aware of the danger till a short time previous to his death, soon after my arrival the pain subsided, pulse sunk, cold clammy sweat, & hippocratic countenance indicated approaching dissolution: on a P.M. examination the appearances were very similar to the last case. the adhesions were not quite so extensive, but there was more purulent discharge. A short time after, his brother was similarly attacked, the lancet was used & arrested it.

I saw a son of Badwallades Evans on the 6th day after his attack with clammy skin, & feeble pulse, yet there was exquisite tenderness. could not lay on his sides. Leached him & gave neutral mixt. on the first day afterwards bled him. Dr. Morton was called in. we rubbed his ^{abdomen} with Spts. Scrub. he seemed to get better, but it was a delusive calm. He died. Towards the close he had something like Black vomit.

2nd. Mrs. 5th 1811. I was called to a servant girl of O. Alsop who had been troubled with a cough, some days previous. 1st mo 31st she complained of pain in the abdomen, the night previous to my being called, she was attacked with violent vomiting great pain & tenderness to the stomach touch & sympathetic

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pain in the shoulders & back, countenance disturbed, tongue
 moist, breathing rather laborious, pulse frequent & rather
 contracted, bowels constipated. Ordered *℞. Ricini* \mathfrak{z} j every 2 hrs.
 & \mathfrak{z} x of blood to be taken, but the symptoms continued
 and I continued the *Pil.* Enema was used and I ordered
 \mathfrak{z} xvi of blood to be drawn, fainted when \times had been taken
 symptoms continuing a blister was applied to the ab-
 domen. Oil to be given through the night. next morning
 found her asleep, in the night had been restless. no bet-
 ter at 12 o'clock, & in addition there was stranguary. I
 then ordered the *Infus. Sennæ* with Soda in it, a cup-
 ful every hr. as bowels were still constipated. At
 10 P.M. wrists cool, pulse sunk, tongue clammy & brown,
 was restless thirsty & constipated. Directed the Warm
 Bath, the blister to be renewed, & instead of Senna
Cal. Pills *grs*ij every hr. a short time after died.
 I also directed at the same time with the *Cal.* a Turpentine enema
 with mucilage. She complained of pain to the last, 22 hrs. P.M.
 on examination the ovum was agglutinated to the intestines
 the small intestines closely adhering, on the anterior part cov-
 ered with lymph, several oz of dark coloured pus in the cav-
 ity of the abdomen, also in the *Cæcum*. the small & large

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intestines covered with flatus. The liver adhered to the diaphragm, stomach ~~of~~ contained some dark matter, some bloody serum was found in the cavity of the thorax, heart natural but small, There was also effusions in the substance of the lungs similar to Peripneumonia Notha perhaps this was the immediate cause of death. It was in this case I remarked particularly the adhesions between the small intestines themselves & here I was convinced of that being the cause of constipation by suspending the Peristaltic motion. On reviewing this case P. M. I thought I could have amended my treatment, by depleting to further extent but the fainting appeared to prevent it. but if I had another case I would do the bleeding myself; but another objection occurred; the pain in the chest that accompanied the Catarrhal symptoms suddenly ceased and the difficulty of breathing continued giving the idea that suppuration & effusion had then taken place. Before closing I will call your attention to another interesting view and will remark, that we as medical men should not be biased by prejudice, thinking as we have been taught, that effusion always takes place through a highly

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inflammatory disposition & that adhesions will not take place without it. For in practice there are exceptions. The blood vessels of serous membranes, acquire a capability of throwing out lymph, and thus producing adhesions. This I will exemplify in the case of P. Whitehead when I treat of diseases of the heart & in that of A. Thomismacker. when on Dyspepsia, by which he was much reduced. & when in the last stage was taken with great pain as was evident from his constant moaning. On dissections the intestines in many places were agglutinated by recent lymph. the liver was covered with a coat of the same. The Pylorus was large & indurated. I think I never opened a body containing as little blood as this. I suppose it did not exceed 3 lbs or at most 5. William Ashbridge worn down by diabetes had the same symptoms & appearances. Dr. Price says, Bichat mentions these peculiarities in his lectures. Gregory in his paper on inflammation relates a case of it occurring from great debility. All this goes to prove the danger of reducing a patient previous to operating, it having a tendency rather to invite inflammation.

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Acute diseases of the Stomach

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I will take up now the acute diseases of the stomach. It is familiar perhaps to all that sudden & acute affections of the stomach produce the most serious consequences. I have seen instant death produced here by a blow: & also by a spasm, but it is the effects of poison I now wish to speak: of all these arsenic is most frequent: by its corrosive powers it produces speedy dissolution. To illustrate it I will state the case of J. F. ^{Talper} ~~Little~~ a young Frenchman a clerk: he swallowed about $\frac{3}{4}$ oz. ¹/₂ hr before his death. I saw him, he resisted violently all attempts to force him to swallow. ^{mother and mother} On P.M. examination his stomach was completely scorched, & the powers of life suddenly destroyed. As medical men we ought to set our faces decidedly against the practice of introducing poisons into the house for the destruction of vermin: it has been mistaken for magnesia as at Woodbury where 3 children were destroyed, & in this city in the case of the wife of J. P. Dope. It has also been mistaken for cream of tartar producing fatal consequences. But even in minute quantities it has produced serious effects. I was called to a family in this city, all those who had eaten of a particular dish, were seized with vomiting & distress at stomach, but they recovered. They had been previously out of town, the house was infested with rats & they

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placed some arsenic for them, incautiously some salt had been left in a dish
the rats running from the poison to the salt, impregnated it. this salt was
used for seasoning the meat. In place of Dr. Griffiths who was unwell I at-
tended a family who were similarly affected, in this case it was thought
to have been occasioned by rats running in poison at some of their neighbours &
afterwards in the flour barrel. A few yrs. ago a family after eating a meal were
taken with vomiting, some were very ill with great distress at the stomach. Dr. Neal
was called in who wished my attendance; when I arrived an apprentice who was at first
least affected & the only one that wanted breakfast on the following morning had the
impression then so strongly received that he soon died. the body was opened & although
the stomach was red & inflamed, as we thought by arsenic, yet the quantity was
too minute to be detected by chemical tests. A servant girl, although herself &
child were ill from it was suspected by the master of the house. Enquiry
being made of her character & being found not to be of the best, strengthened
the prejudice against her: she was called before the coroner's jury, who
also were somewhat prejudiced against her. When Dr. Neal and myself
made the deposition of her illness our judgement was called in question. I thought
of an expedient; on my visits to them I observed the remarkable manner
in which their tongues were covered with ^{white} fur. I had then all brought
their tongues were shown & if there was any difference she had the
most. this satisfied the jury. Had we given way to the general preju-
dice in all probability her life would have been the sacrifice.

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The effects of Laudanum

generally occur among children, sometimes occasioned by the sediment, that is produced by the alcohol evaporating & depositing the opium. I ~~never~~ even met with one practitioner so shamefully ignorant of this that he would not believe it till I showed it to him in his own laudanum bottle. gtt. 2 or 3 of this may destroy an infant. I consider this of a danger, ^{of} so universal a nature, that I have at different times warned all the families I am in the habit of attending, not to keep much laudanum in the house, & always to examine & see that it is clear. I was called to an infant, countenance livid, breathing stertorous, & pupils contracted, gtt. iij only had been given; when I came to inquire of the apothecary I found he sold it out of the same bottle in which it was prepared. One child I was called to had a catarrhal affection its parents thought it ought to have some Laudanum. they found some that had been in the house a considerable time, thinking it grew weaker with age, they shook it up, & gave what they thought sufficient. the child died.

Laudanum ~~was~~ is frequently taken by suicides. When you recollect the sympathy between the stomach & the brain you will not be surprised at the apoplectic symptoms

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that ensue. In $\frac{1}{2}$ hr. after taking it the effects begin⁽⁶⁶⁾
to appear, if the dose is large, stupor, stertorous breathing, slow
full & labouring pulse, livid countenance, (This does not
always attend apoplexy, but always that brought on by
Laudanum, & it is so striking that from it I have discov-
ered the cause) pupils morbidly contracted: I was called
in consultation to a young lady who was affected with
coma, stertorous breathing, livid countenance, & immedi-
ately suspected Laudanum to be the cause. This I suggested
to the physician who thought it impossible. I told him to
make some inquiry while I went out. I returned imme-
diately with a syringe & tube. On searching the room they
found a bottle with some Laudanum in it. the Apothecary's
name being in it, they sent & learned that she had
bought a considerable quantity the evening before. She died.

Formerly emetics were given largely, but they are not to
be relied on. One case I attended with Dr. James. the quan-
tity of Tart. Emet. Spueac, & Sulph. Zinc. we administered excec-
ded belief: they did not produce vomiting so torpid was
the stomach. Stimulation was applied to the fauces. & some
blood was taken, & a tobacco cataplasm. applied to the abdo-
men. These jointly produced the effect, the next day so

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violent had been the applications, that inflammation. (67)

& a complete attack of the group was brought on. Recovered

The most effectual plan is to wash out the stomach by the means of a syringe & elastic tube: but sometimes after you succeed in evacuating the stomach the patient will die as if some peculiar disease was produced. To illustrate this I will state one or two cases. A child had taken some Laudanum that was turbid, it affected it very considerably although it had been accustomed to the use of L. when in pain. I evacuated the stomach & procured a passage through the bowels, but still the stupor remained, supposing some L. was left, I gave an emetic which quickly operated, but the child grew worse & worse & soon died.

Another that a catarrhal affection, the stomach was evacuated considerable dyspnoea remained, arising I thought from an effusion in the lungs, it also died. and another case nearly similar. Thus after a cer-

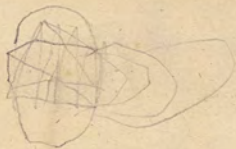
tain point of disorganization has taken place all means will fail. The cause may be removed but the effect remains.

6th mo. ^{8th} 1818. Called to the daughter of respectable parents about 4 miles from Cambridge, she had taken 3ij of Laudanum. Dr. Henry was sent for: he tried to excite vomiting. he gave

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the Lemon acid & a Tobacco enema. it was immediately rejected, he also bled her twice & he thought with advantage: about this time I arrived, countenance livid, considerable action observable in the carotids, somewhat sensible countenance ghastly, pupils contracted, shoulders rose in breathing, pulse strong, full & rather frequent. I introduced the tube, washed out the contents of the stomach, & continued rinsing it for an hour. with warm water, chamomile tea &c. she improved very much under it; her intellect becoming quite clear, & her conversation rational. thinking the Laudanum had penetrated her intestines I threw some Castor Oil through the tube & gave a cathartic enema. I proposed a mustard plaster should be applied to the stomach to prevent the depression I thought would follow. I wished the Dr. to watch her narrowly & if necessary to employ stimulants; we stepped into the next room to take some tea (being much fatigued) in half an hr. she was much worse pulse irritable & barely perceptible, had Subcultur Tenu-dinum; she died a very short time after I left the house. At 1. P.M. she took the Laud at 7 I saw her and at 11 returned to the city.





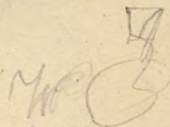
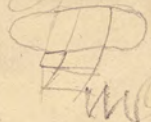
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